**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90056 037 \*\*\*150.00

DOCUMENT #	P98000024333
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1. Corporation Name

BIG PLANET ENTERPRISES, INC.

Principal Place of Business
717 S 14TH AVE

Mailing Address

|--|

717 S 14TH AV		717 S 14TH AVE HOLLYWOOD FL 33020				
				DO NOT WRITE IN THI  3. Date Incorporated or Qualifed  03/13/1998	S SPACE	
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number		oplied For
<b>├</b> ── `	N.E. 6th Avenue		h Avenue	65-0823676	<u> </u>	ot Applicable
Suite, Apt. : 20F		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional equired
City & State	e	City & State		6. Election Campaign Financing	\$5.00	May Be
23 Fort	Lauderdale, Florida	28 Fort Lauderd	lale, Florida	Trust Fund Contribution		to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year l	ntangible	
24 33334	25 USA	29 33334 3	USA	Personal Property Tax.	Yes	Mo
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	d Agent	
000	TT IACON		81 Name	Cooks		
l col Common Addition			on Scott dress (P.O. Box Number is Not Acceptable)	<del></del>		
1	S 14TH AVE			1 N.E. 6th Avenue		
) HOLI	LYWOOD FL 33020		83			
			#20F 84 City	. E		Code 334
11. Pursuant i	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-named con	Tauderdale Florida rporation submits this statement for the purpose of tion's board of directors. I hereby accept the app	of changing its	registered
office or re	egistered agent, or both, in the State of	f Florida. Such change was aut	horized by the corpora	tion's board of directors. I hereby accept the app	ointment as re	egistered
	m familiar with, and accept the obligati	One of Cont		H0,17,28	.99	1
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered agent signature requi	ired when reinstating) DATE	<del>/_\</del>	Ì
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
TITLE	PVST	☐ DELETE	1.1 TITLE		Change	Addition
NAME			1.2 NAME			
STREET ADDRESS	Jason Scott	li o om	1.3 STREET ADDRESS			ļ
CITY-ST-ZIP	5314 N.E. 6th Avenu		1.4 CITY-ST-ZIP			-
TITLE	Fort Lauderdale, Fl	orida 33334 DELETE	2.1 TITLE		Change	☐ Addition
NAME		_	2.2 NAME			1
1 1			2.3 STREET ADORESS			Ì
STREET ADDRESS			2. 4 CITY-ST-ZIP			}
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	··········	Change	Addition
		C 055515	3.2 NAME			<u> </u>
NAME						
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. City-ST-ZIP		Change	Addition
TITLE						
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		□ DELETE	4.4 CITY-ST-ZIP		Change	Addition
TITLE	•	☐ DELETE	5.1 TITLE			
NAME			5.2 NAME	/ · · · · · · · · · · · · · · · · · · ·		. : [
STREET ADDRESS	· .		5.3 STREET ADDRESS	The state of the s	# N 19 1	4 W 3378
CITY-ST-ZIP			5.4 CITY-ST-ZIP		Chance	[ ] Audition
TITLE		☐ DELETÉ	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other the propowered.