

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Martham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000004491 (6)

1. Corporation Name

PLANET SILK CO.

Principal Place of Business

5625 FACTORY SHOPS BLVD  
ELLENTON FL 34222  
US

Mailing Address

23 TURNTABLE JUNCTION  
FLEMINGTON NJ 08822

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29

Country

30

9. Name and Address of Current Registered Agent

ROBINS, DINA L  
5625 FACTORY SHOPS BLVD.  
ELLENTON FL 34222

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	ROBINS, LEE	1.2 NAME	ROBINS, LEE
STREET ADDRESS	25 LOCKLEY CT	1.3 STREET ADDRESS	23 TURNTABLE JUNCTION
CITY-ST-ZIP	MOUNTAINLAKES NJ	1.4 CITY-ST-ZIP	FLEMINGTON NJ 08822
TITLE	ST	2.1 TITLE	ST
NAME	ROBINS, FRED	2.2 NAME	ROBINS, FRED
STREET ADDRESS	25 LOOKLEY CT	2.3 STREET ADDRESS	23 TURNTABLE JUNCTION
CITY-ST-ZIP	MOUNTAINLAKES NJ	2.4 CITY-ST-ZIP	FLEMINGTON, NJ 08822
TITLE	VP	3.1 TITLE	300002319643
NAME	KULE, GENE	3.2 NAME	-10/14/97-01012-018
STREET ADDRESS	62 W. 62ND ST.	3.3 STREET ADDRESS	***550.00 ***550.00
CITY-ST-ZIP	NEW YORK NY	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	
NAME	KULE, ARLENE	4.2 NAME	
STREET ADDRESS	62 W. 62ND ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	4.4 CITY-ST-ZIP	
TITLE	VPO	5.1 TITLE	VPO
NAME	ROBINS, DINA L	5.2 NAME	ROBINS, DINA
STREET ADDRESS	777 MAIASA DR	5.3 STREET ADDRESS	2749 WHITEBRIDGE GLEN
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	UNIVERSITY PARK, FL 34201
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE

APPROVED  
AND  
FILED

1997 OCT -6 AM 9:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/30/1994	3a. Date of Last Report 08/20/1996
4. FEI Number 22-3256361	Applied For Not Applicable
5. Certificate of Status Desired □	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution □	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent

CR2E034 (497)

10/14/97

9/15/97