## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

	1997		The state of the s	DIVISION	OF CORPORA	ATIC	NS	Score	ii y	OI D	iaic
DOCUI 1. Corporation PLANET		# K4		(3)	· · · · · · · · · · · · · · · · · · ·						
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Principal Piac	e of Busines	S	Mai	ling Address						<b>3 (8)</b>	
8127 ST RD 52				8127 ST RD 52							
HUDSON FL 34667 US				HUDSON FL 34667-6728 US							
US .			US					3. Date Incorporated or Qualified 11/03/1988	1	Date of Last Re 101/1996	port
2. Principal P	lace of Busin	ness	2a. 1	Mailing Address	······································			4. FEI Number		Ap	plied For
Suite, Apt.	# ata		26	Suite, Apt. #, etc			·	59-2915924		\$8.75 A	t Applicable
22 Suite, Apr.	W, DIG.		27	suite, Apr. #, etc	,			5. Certificate of Status Desired	V	Fee Re	
City & Stal	0			City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	
Zip	- Common Strate Common Tree	Country	<u> </u>	Zip	Cou	ntry		8. This corporation has liability fo			199.032,
24	o Name	25 Addres	29 s of Current Registe	red Agent	30			Florida Statutes  10. Name and Address of New R		☐ No	
DAG			s or ourient riegrate	neu Agent		81	Name	IG. Name and Address of New Co	oğisto ou	- Agoill	
BAGINSKIE, J ANTHONY 8127 STATE RD 52						62	Street Add	dress (P.O. Box Number is Not Accepta	hlai		
HUDSON FL 34667							Direct Add	areas (1.0, box number is not necessit			
						83					
						84	City		FI	85 Zip (	Code
11. Pursuant	to the provis	sions of Section	ons 607.0502 and 60	7.1508. Florida S	Statutes, the at	OOVE	named co	rporation submits this statement for the	DUIDOSA (	of changing it	s registered
office or r	registered ag	gent, or both,	in the State of Florida	a. Such change i	was authorized 5. Florida Stat	d by	the corpore	ation's board of directors. I hereby acc	pt the ap	pointment as	registered
SIGNATURE	/ 1.	_	Bound of registered gions and fille if	1/ 4	e1			4	-20	-97	
12.	Slignature, typic		of registered from and fille if FICERS AND DIRECT		(NOTE: Registered	I Age	nt signature requ	ured when reinstating)  ADDITIONS/CHANGES TO OFF	DATE CEDS AN	D DIDECTOR	C IN 10
Tillf	P		TIOCHS AND DIRECT	DELETI		TLE	· · · ·	ADDITIONS/CHANGES TO OFF	CENS AN	☐ Change	Addition
NAME	BAGINSH	KIE, ANTHOI	NY J		1.2 NA						
STREET ADDRESS	8127 ST	ATE ROAD			1.3 ST	REET	ADDRESS				);
CITY - S1 - ZIP	<del> </del>	I FL 34 <del>6</del> 67			1.4 01		T-21P				(
TITLE	VP	45 OTTO 16	PA1 4.4	DELETI			ļ			(hange	Addition
NAME DARKE LIDEDESS		(IE, STEPHE ATE ROAD (			22 N/		1000000				
STREET ANDRESS CITY-ST-ZIF		N FL 34867	9 <b>2</b>		1		address 11-zip				
THILE	ST	112 0100		DELETI			11 - 4.87			Change	Addition
NAME:	BAGINS	(IE, BREND/			3.2 N/	ME					
STREET ADDRESS		ATE ROAD	52		3.3 \$1	REET	ADDRESS				İ
CITY-SI-ZIP	HUDSON	I FL 34667		T or ra			iT-2IP			T 1 00	1 4 4 2 5 5 5 5
1)TLF	ļ			☐ DELET			- {			Change	Addition
NAME STREET ADORESS					4.2 N		ADDRESS				
City-St-Zip					4.4 CI		1				İ
TITLE				DELET			·			Change	Addition
NAME					5.2 N/	ME	ŀ				l
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NAME STREET ADDRESS	ł				6.2 N/		ADDRESS				ĺ
					E 4.0 (3)		TOP INCOME				L.

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:

**FILED** 

Apr 25 1997 8:00am

Secretary of State