

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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AND
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95 MAY -1 PM 4: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # M92304 (8)

1. Corporation Name
PLANAR, INC.

Principal Place of Business

LEO HENRIQUEZ
1401 HWY A1A -STE 203
VERO BEACH FL 32963
US

Mailing Address

LEO HENRIQUEZ
1401 HWY A1A - STE 203
VERO BEACH FL 32963
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/03/1988

3a. Date of Last Report
05/01/1994

4. FEI Number
65-0093022

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

6. This corporation has liability for intangible tax under S. 195.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

24. Zip

25. County

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

29. Zip

30. County

9. Name and Address of Current Registered Agent

HAYS, RICHARD J.
7200 W. COMMERCIAL BLVD.
SUITE 207
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent

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 registering)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
VD
HAYS, RICHARD J.
7100 W. COMMERCIAL BLVD
LAUDERHILL FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
PD
HENRIQUEZ, LEO
1190 DRIFTWOOD DRIVE
VERO BEACH FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
SDT
PIGNA, MARIO
8295 N.W. 56TH STREET
MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

SDT
Mario Pigna
8295 NW 56th Street
Miami, FL

☐ Change ☐ Addition

3000001484273
-05/11/95--01078--001
1000.00 *200.00

☐ Change ☐ Addition

☐ Change ☐ Addition

Delete
Deceased

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I, Leo Henriquez, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 recipient 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 attached sheet of paper.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Leo Henriquez, President 4-28-95 407-231-8929