

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004079

FILED
Apr 30, 2005
Secretary of State

Entity Name: THIRD PLANET, INC.

Current Principal Place of Business:

5200 N. FEDERAL HWY
#2
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5200 N. FEDERAL HWY
#2
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-0940668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE., STE. 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BENJAMIN, DAVID N
Address: 728 N.E. 5TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: D () Delete
Name: BENJAMIN, BARRY J
Address: 14731 67TH TRAIL NORTH
City-St-Zip: WEST PALM BEACH, FL 33418 US

Title: D () Delete
Name: WORSOE, NIELS
Address: BAADMANDSTIAEDE 43
City-St-Zip: COPENHAGEN, K 1407 OC

Title: D () Delete
Name: FARMER, ROBERT
Address: 5200 N. FEDERAL HWY SUITE 2
City-St-Zip: FORT LAUDERDALE, FL 33308 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT FARMER

D

04/30/2005

Electronic Signature of Signing Officer or Director

Date