2003 FOR PROFIT CORPORATION

UN	IFUNNI BUSINE	33 REPURI	lobu)	- CD 05, 2005 0:00 am	
DOCU 1. Entity Nar PLANETA	0080667			Secretary of State 02-05-2003 90130 015 ***158.75		
3790 PIETRO FORT MYERS	EL-33916	Mailing Address 2871 SOMERSET DRIVE #416 FORT LAUDERDALE FL 33311				
2871:	Place of Business 50MERSET DR	3. Mailing Address 287 Som ERSET DR		و		
Suite, Apt. # 4/6		Suite, Apt. #, etc. # 416			CHECK HERE IF MAKING CHANGES	
	RDALE LAKES	City & State LAUDERDALG		, PC	4. FEt Number 65-1034726 Applied For Not Applicable	
33311	Country	33311	Country	·	5. Certificate of Status Desired \$8.75 Additional Fee Required	
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	6. Name and Address of Current F	Registered Agent			7. Name and Address of New Registered Agent	
ARRUDA, ROSEMIERE P 2871 SOMERSET DRIVE #416			Street Address (P.O. Box Number is Not Acceptable)			
FORT LAUDERDALE FL 33311			City	City FL Zip Code		
8. The above named entity submits this statement or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or prince time pregistered and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1; 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ARRUDA, ROSEMEIRE P 2871 SOMERSET DRIVE FORT LAUDERDALE FL 33311	DIRECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	287/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 5 T Change Addition UNA ROSEMEIRE P. I SOMERSET DR #416 DERNALE LAKES, FL 33311	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ARRUDA, JOSE 2871 SOMERSET DRIVE FORT LAUDERDALE FL 33311	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	

s fing cloes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the state of the section of the sect 12. I hereby certify that the information supplied with this findicated on this report or supplemental report in the corporation or the receiver of trusteelers powere changed, or on an attachment with an address with a

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIG ING OFFICER OR DIRECTOR