

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 8:00 am
Secretary of State

01-19-2007 90023 050 ***150.00

DOCUMENT # P00000092969

1. Entity Name
C & M PLANET PRODUCTS, INC.



Principal Place of Business
**141 NE 3RD AVE
406
MIAMI, FL 33132**

Mailing Address
**141 NE 3RD AVE
406
MIAMI, FL 33132**

50000609

2. Principal Place of Business - No P.O. Box #
2813 Executive Park Dr.

3. Mailing Address
2813 Executive Park Dr.

Suite, Apt. #, etc.

01162007 Chg-P CR2E034 (12/06)

City & State
Weston, FL

4. FEI Number
65-1044817

Applied For
☐ Not Applicable

Zip
33331

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MESA, JOSE MIGUEL
1560 SAWGRASS CORPORATE PKWY 4TH FLR
SUNRISE, FL 33323**

7. Name and Address of New Registered Agent

Name
Mesa, Jose Miguel

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

City
FL

Zip Code

8. The above named entity submit this statement for 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 **Carlos A. Mesa** (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD	MESA, JOSE MIGUEL <input type="checkbox"/> Delete	TITLE PD	Mesa, Jose Miguel <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS 141 NE 3RD AVE. # 406		STREET ADDRESS "same above"	
CITY-ST-ZIP MIAMI, FL 33132		CITY-ST-ZIP	
TITLE VP	MESA, CARLOS A <input type="checkbox"/> Delete	TITLE VP	Mesa, Carlos A. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS 141 NE 3RD AVE. # 406		STREET ADDRESS "same above"	
CITY-ST-ZIP MIAMI, FL 33132		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Carlos A. Mesa**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #