## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 02, 2002 8:00 am<sup>3</sup>/<sub>2</sub> Secretary of State **FILED** P00000093176 DOCUMENT # 1. Entity Name 05-02-2002 90009 008 \*\*\*150.00 PLANET ITALY, INC. Principal Place of Business Mailing Address 500 NW 62ND STREET 500 NW 62ND STREET SUITE 455 SUITE 455 FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For PPLIED FOR <u>65-1</u>:05040 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TOMLINSON, JOHN L Street Address (P.O. Box Number is Not Acceptable) 500 NW 62ND STREET SUITE 455 FORT LAUDERDALE FL 33309 بركي City Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME RUSIN, LORENZO NAME STREET ADDRESS STREET ADDRESS 500 NW 62ND ST. STE 455 CITY-ST-ZIP FORT LAUDERDALE FL 33309 CITY-ST-ZIP Change Addition TITLE TITLE Delete NAME NAME STRADOLINI, GIANNI GIACOMO STREET ADDRESS STREET ADDRESS 500 NW 62ND ST STE 455 CITY-ST-ZIP FORT LAUDERDALE FL 33309 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE STD NAME NAME DE MARCO, GIUSEPPE STREET ADDRESS 500 NW 62ND ST STE 455 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33309 ☐ Change ☐ Addition TITLE ☐ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

RELorenzo Rusin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

03-20-02

954 771 9336

Daytime Phone #