

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000070334

1. Entity Name
PLANET EARTH RELATIONSHIP CENTER, INC.



Principal Place of Business
**2505 ENTERPRISE ROAD
SUITE 6
CLEARWATER, FL 33763**

Mailing Address
**2505 ENTERPRISE ROAD
SUITE 6
CLEARWATER, FL 33763**



04282006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-2470051	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PESACOV, ANNE L
2505 ENTERPRISE ROAD
SUITE 6
CLEARWATER, FL 33763**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

**U00000543865
05/11/06-80012-022 150.00**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PESACOV, ANNE L
STREET ADDRESS	2505 ENTERPRISE ROAD, SUITE 6
CITY-ST-ZIP	CLEARWATER, FL 33763

TITLE	D
NAME	DIXON, BETTY S
STREET ADDRESS	2505 ENTERPRISE ROAD, SUITE 6
CITY-ST-ZIP	CLEARWATER, FL 33763

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/06
Date

727-738-7222
Daytime Phone #