2005 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P04000122802 03-25-2005 90025 027 ***150.00 1. Entity Name HOSPITAL PLANET, INC. Principal Place of Business Mailing Address 9478 N.W. 13TH STREET 9478 N.W. 13TH STREET ... MIAMI, FL 33178 MIAMI, FL 33178 3. Mailing Address 245T #219 2. Principal Place of Business Suite, Apt. #, etc. Sulte, Apt. #, etc. City & State City & State 3316 S MIAMI Zip Country Country Zip 8. Name and Address of Current Registered Agent Name PEREIRA; DANIEL.C. Street Address (P 9478 N.W. 13TH STREET MIAMI, FL 33178 8. The above named entity submits this statement for the purpose of changing its registered office or registered the obligations of registered agent. Sonature broad or conten name of monitored agent and life if applicable INOTE: Rematered Agent money as required to FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$560.00 9. Election Campaign Financing \$5.0 Trust Fund Contribution. Adde OFFICERS AND DIRECTORS 10. mæ ☐ Delete TITLE PEREIRA, DANIEL C NAME NAME STREET ADDRESS 9478 N.W. 13TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33178 CITY-ST-ZP Oeteta TITLE TITLE NAME: NAME STREET ADORESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP 1ITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CETY-ST-772 title -Delete nne. NAME NAME STREET ADDRESS STREET ADDRESS CITY - \$1 - 71P City-ST-70 TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete THE TITLE NAME STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-\$1-21P 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Soci indicated on this report or supplemental report is true and accurate and that my signature shall have the sa of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, I changed, or on an attachment with an address) with all other like empowered.

3/23/2005

SIGNATURE:

FILED Apr 19, 2005 8:00 am Secretary of State

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