

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2008 8:00 am
Secretary of State

05-01-2008 90239 023 ***150.00

DOCUMENT # P06000099682 1. Entity Name THE NEW PLANET STONE, INC.			
Principal Place of Business 13132 S.W. 212TH TERRACE MIAMI, FL 33177		Mailing Address 13132 S.W. 212TH TERRACE MIAMI, FL 33177	
2. Principal Place of Business - No P.O. Box # 13132 SW 212 Terr Suite, Apt. #, etc.		3. Mailing Address Same Suite, Apt. #, etc.	
City & State Miami, Florida Zip 33177		City & State Zip 	
Country USA		Country 	
4. FEI Number APPLIED FOR 20-5304043		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DIAZ, MERCEDITAS 13132 S.W. 212TH TERRACE MIAMI, FL 33177		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: <u><i>Merceditas Diaz</i></u> President 4/28/08 (Signature, dated or printed name of agent, and date of signature) (NOTE: Registered Agent signature required when renewing) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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 NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete D DIAZ, MERCEDITAS 13132 S.W. 212TH TERRACE MIAMI, FL 33177	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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 supplementary 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: <u><i>Merceditas Diaz</i></u> SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/28/08 756/302-1017 Date Office Phone #	