## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FILED **PROFIT** FLORIDA DEPARTMENT OF STATE Jan 26 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P94000036035 (1) DOCUMENT # 1. Corporation Name PLANET FUN RIDE AND ROLL, INC. Mailing Address Principal Place of Business % RONALD H. YAFF 50 Lorius A.W. DO NOT WRITE IN THIS SPACE Bradingen 34212 3. Date Incorporated or Qualified 05/12/1994 Applied For 65-0535179 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent YAFFE, RONALD H -2456-101H-ST SARASOTA-FL-3429 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent, I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE 12. 13. DELETE TITLE 1.1 TITLE YAFFE, RONALD H NAME 1.2 NAME -2153 TOTH ST 1.3 STREET ADDRESS STREET ADDRESS -BARASOTA-FL 34237 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE πl£ 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$T - ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-\$T-ZIP

DELETE

6.1 TITLE

6.2 NAME

6 3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, og on any attachment with an addressy

Change

Addition