FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000036035**

PLANET FUN RIDE AND ROLL, INC.

FILED
Feb 02, 1999 8:00am
Secretary of State

02-02-1999 90031 025 ***150.00

					- I (##II/##I tim Imits Difts antit antit antit a		
ncipal Place	of Business	Mailing Address					
O CÓRTEZ RI	D W	7250 CORTEZ RD W					
3 10TH-ST	: ·	2153 10TH ST Bradenton FL 34210			DO NOT WRITE IN TH	IIS SPACE	* *
adenton fl	34210	US			3. Date incorporated or Qualifed 05/12/1994	•	
		2a. Mailing Address			4. FEI Number	Ai	pplied For
Principal Pla	ace of Business	<u>}-</u>			65-0535179	N	ot Applicable
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired
27					The state of the s	\$5.00 May Be	
City & State	· · · · · · · · · · · · · · · · · · ·	City & State			6. Election Campaign Financing Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Countr	У .	8. This corporation owes the current year	Intangible	l'This
	25	29	30		Personal Property Tax.	☐Yes	□No :
	9. Name and Address of Curren				10. Name and Address of New Register	ed Agent	
			8	l Name			
VAFF	FE, RONALD H		-	2. 2	ess (P.O. Box Number is Not Acceptable)		
7050	CORTEZ RD W		82	Street Addre	ess (P.O. Box Number is Not Acceptable)	Marin . 15 7 . 2 . 1 44	
	DENTON FL 34210		8:	3		12. 31 23 23	
DŅAI	DEMICH PE 34210		٦	-		\$2.00 B	17 14 17 19 18
			8-	4 City		85 Zip	Code
				I			
agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	itions of, Section 607.0505, Flori	ida Statute	is.	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	· .	egistered
agent. I a	egistered agent, or both, in the State in familiar with, and accept the obligation of the state of registered agents.	tions of Section 607.0505, Floring and title if applicable. (NOTE: ID DIRECTORS	Registered Ag	S. ent signature required	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
office or n	egistered agent, or both, in the State in familiar with, and accept the obligation of the state of registered agents.	tions of, Section 607.0505, Flori	ida Statute	S. ent signature required	d when reinstating) Section DATE	· · · · · · · · · · · · · · · · · · ·	ORS IN 12
agent. I an	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN	tions of Section 607.0505, Floring and title if applicable. (NOTE: ID DIRECTORS	Registered Ag	S. ent signature required	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
GNATURE 2. LE	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H	tions of Section 607.0505, Floring and title if applicable. (NOTE: ID DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAMI	S. ent signature required	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
in office or reading agent. I as IGNATURE 2. The ME REET ADDRESS	Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W	tions of Section 607.0505, Floring and title if applicable. (NOTE: ID DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAMI	ent signature required	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
ignature Z. LE ME REET ADDRESS TY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H	titions of Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE	ent signature required E ET ADDRESS -ST-ZIP	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
GNATURE Z. LE ME REET ADDRESS TY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W	tions of Section 607.0505, Floring and title if applicable. (NOTE: ID DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE	ent signature required ET ADDRESS ST-ZIP	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
GNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	titions of Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI	ent signature required EET ADDRESS -ST-ZIP EE	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
GNATURE Z. LE ME REET ADDRESS TY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	titions of Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE	ent signature required EET ADDRESS ST-ZIP EET ADDRESS	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
GNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	tions of Section 607.0505, Floring translations of Section 607.0505, Flo	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY	ent signature required EET ADDRESS -ST-ZIP	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12 Additio
GNATURE 2. LE ME REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	titions of Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE	Registered Ag	ent signature required EET ADDRESS -ST-ZIP	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT Change	ORS IN 12 Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP TLE (AF	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	tions of Section 607.0505, Floring translations of Section 607.0505, Flo	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.2 NAMI 3.2 NAMI 3.3 NAMI 3.3 NAMI 3.4 CITY 3.5 NAMI 3.5 NAM	ent signature required EET ADDRESS - ST-ZIP EET ADDRESS (- ST-ZIP EET ADDRESS	d when reinstating) 1.1.54.5 DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT Change	ORS IN 12 Addition
GNATURE LE ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME ME REET ADDRESS IY-ST-ZIP ILE ME ME REET ADDRESS IY-ST-ZIP ILE ME	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	tions of Section 607.0505, Floring translations of Section 607.0505, Flo	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.2 NAMI 3.2 NAMI 3.3 NAMI 3.3 NAMI 3.4 CITY 3.5 NAMI 3.5 NAM	ent signature required EET ADDRESS -ST-ZIP	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT Change	ORS IN 12 Addition Addition
IGNATURE LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS REET ADDRESS REET ADDRESS REET ADDRESS REET ADDRESS REET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	tions of Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE	Registered Ag	ent signature required EET ADDRESS - ST-ZIP EET ADDRESS (- ST-ZIP EET ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition
IGNATURE LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP REET ADDRESS IY-ST-ZIP REET ADDRESS IY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	tions of Section 607.0505, Floring translations of Section 607.0505, Flo	Registered Ag	ent signature required ent signature required EET ADDRESS .ST-ZIP .EET ADDRESS /-ST-ZIP .EET ADDRESS /-ST-ZIP .EET ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition
TILE TILE	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	Itions of, Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 3.4 CITY 3.4 CITY	ent signature required ent signature required EET ADDRESS .ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME AME AME AME AME AME AME A	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	tions of Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRI 2.4 CITY 3.1 TITLI 3.2 NAMI 3.3 STRI 4.1 TITLI 4.2 NAMI 4.2 NA	ent signature required ent signature required EET ADDRESS .ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS .'-ST-ZIP .EET ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME IREET ADDRESS TY-ST-ZIP TLE AME ITHEET ADORESS TY-ST-ZIP TLE AME TREET ADORESS TTT-ST-ZIP TLE TREET ADORESS	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	Itions of, Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRI 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRI 4.1 TITLE 4.2 NAMI 4.3 STRI 4.3 ST	ent signature required E EET ADDRESS ST-ZIP EET ADDRESS C-ST-ZIP E E EET ADDRESS A-ST-ZIP E E EET ADDRESS A-ST-ZIP E E EET ADDRESS A-ST-ZIP E E EET ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME IREET ADDRESS TY-ST-ZIP TLE AME ITY-ST-ZIP TLE AME TREET ADORESS TY-ST-ZIP TLE AME TREET ADORESS TY-ST-ZIP TLE TREET ADORESS TY-ST-ZIP TLE TREET ADORESS TY-ST-ZIP TLE TREET ADORESS TY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	Itions of, Section 607.0505, Floring and title if applicable (NOTE: ID DIRECTORS DELETE DELETE	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRI 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRI 4.1 TITLE 4.2 NAMI 4.3 STRI 4.3 ST	ent signature required E EET ADDRESS .ST-ZIP E EET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E EET ADDRESS /-ST-ZIP E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E-ST-ZIP E-ST-ZIP	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME IREET ADDRESS TY-ST-ZIP TLE AME ITHEET ADORESS TY-ST-ZIP TLE AME TREET ADORESS TTT-ST-ZIP TLE TREET ADORESS	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	titions of, Section 607.0505, Floring the control of the control o	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRI 2.4 CITY 3.1 TITLE 4.2 NAMI 4.3 STRI 4.4 CITY 4.2 NAMI 4.3 STRI 4.4 CITY	ent signature required E EET ADDRESS ST-ZIP E EET ADDRESSST-ZIP E E EET ADDRESSST-ZIP E E EET ADDRESSST-ZIP E E EET ADDRESSST-ZIP E E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E E-ST-ZIP E	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME IREET ADDRESS TY-ST-ZIP TLE AME ITY-ST-ZIP TLE AME TREET ADORESS TY-ST-ZIP TLE AME TREET ADORESS TY-ST-ZIP TLE TREET ADORESS TY-ST-ZIP TLE TREET ADORESS TY-ST-ZIP TLE TREET ADORESS TY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	titions of, Section 607.0505, Floring the control of the control o	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRI 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRI 4.1 TITL 4.2 NAMI 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAMI 5.1 TITL 5.2 NAMI 5.1 TITL 5.2 NAMI 5.3 TITL 5.2 NAMI 5.3 TITL 5.3 NAMI 5.4 CITY 5.1 TITL 5.2 NAMI 5.3 TITL 5.3 NAMI 5.4 CITY 5.3 TITL 5.3 NAMI 5.4 CITY 5.4 TITL 5.5 NAMI 5.4 CITY 5.5 NAMI 5.5 NAM	ent signature required E EET ADDRESS .ST-ZIP E EET ADDRESS /-ST-ZIP E	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE MME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME AME AME AME AME AME AME A	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	titions of, Section 607.0505, Floring the control of the control o	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5. STRI 5. STRI 5. STRI 5. S	ent signature required EET ADDRESS -ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition Addition
IGNATURE Z. LE ME REET ADDRESS TY-ST-ZIP TLE ME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TTY-ST-ZIP TILE	egistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN D YAFFE, RONALD H 7250 CORTEZ RD W BRADENTON FL 34210	titions of, Section 607.0505, Floring the control of the control o	Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5. STRI 5. STRI 5. STRI 5. S	ent signature required EET ADDRESS ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP EET ADORESS (-ST-ZIP EET ADORESS (-ST-ZIP EET ADORESS (-ST-ZIP EET ADORESS (-ST-ZIP	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change	ORS IN 12 Addition Addition Addition Addition

14. 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 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 trusted 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, or on an attachment with an address, with all other like empowered.

62 NAME 6.3 STREET ADDRESS

SIGNATURE: