SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P94000058272 (3) **DOCUMENT #** PLANET ENTERPRISES, INC. Principal Place of Business Mailing Address 3000 NE 48 ST 3000 NE 48 ST LIGHTHOUSE POINT FL 33064-7139 LIGHTHOUSE POINT FL 33064-7139 3. Date Incorporated or Qualified 3a. Date of Last Report 08/08/1994 04/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied for 21 26 65-0517851 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees  $Z_{10}$ Country Zio Country This corporation has liability for intangible tax under s. 199 032 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name LAMBERT, BARBARA 3000 NE 48 ST 82 Street Address (P.O. Box Number is Not Acceptable) LIGHTHOUSE POINT FL 33064-7139 83 84 City 85 Zip Code 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 changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, type disciple codings on integrational agent and the diapplicable (NOTE\_Registered Agest signature requires when relessaring) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8) TITLE DELETE 11 TIFLE Change Addition NAME LAMBERT, BARBARA 1.2 NAME CR2E034 STREET ADDRESS 3000 NE 48 ST 1.3 STREET ADDRESS CITY - ST - ZIP LIGHTHOUSE POINT FL 33064-7139 1.4 CITY - ST - ZIP 31118 DELETE 21 TITLE Change Addition NAME STEIN, CRAIG A 2 2 NAME STREET ADDRESS 3000 NE 48 ST 2 3 STREET ADDRESS CITY - ST - ZIP LIGHTHOUSE POINT FL 33064-7139 2 4 CHTY - ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME STEIN, TODD A 3.2 NAME 3000 NE 48 ST STREET ADDRESS 3 3 STREET ADDRESS LIGHTHOUSE POINT FL 33064-7139 CITY - ST - ZIP 3.4 CITY-ST-7/P TITLE DELETE 4.1 TIFLE DIRECTOR Change Addition DAVID J. STEIN NAME 4 2 NAME BOON N.E. 48Th ST STREET ADDRESS 4.3 STREET ADDRESS LIGHThouse PTIFL CITY - ST - ZIP 4.4 CITY - \$1 - ZIP 33014-7139 TITLE DELETE 5 1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 7IP TITLE DELETE 6 / TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes if 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address