SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Aug 19 1997 8:00am

Sandra B. Mortham

ANNUAL REPORT 1997			D	Secretary of State DIVISION OF CORPORATIONS					Secretary of State				
DOCUMENT # P9600005411 (9) SILENT PLANET, INC.													
Principal Place	e of Business		Mailing Ado	tress									
2721 FORSYTH RD. SUITE 101 WINTER PARK FL 32782			2721 FORSYTH RD. SUITE 101 WINTER PARK FL 32792					:		OO NOT WRITE			
									 Date Incorporate 01/17/1996 	d or Qualified	3a. Date of	Last He	eport
21	lace of Business	2a, Mailing Address 26					4 EEI Number	35813		No	plied For Applicable		
Suite, Apt.	#, etc.		Suite, A	pt. #, etc.					5. Certificate of Star	tus Desired	□ \$	8.75 A Fee Re	dditional quired
City & State			City & State						6. Election Campaig		<u> </u>	5.00	•
Zip		Country	28 Zip		T Cou	untry			Trust Fund Contri			Added to	
24	25	29 30				79 8. This corporation owes or has paid the current ye Personal Property Tax due June 30. X Yes						No No	
		Address of Current	<u>-</u>						10. Name and Addr	ess of New Reg	istered Ager	ıt	
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 81							Name	:					
390 N. ORANGE AVE.						82	Street	Addres	s (P.O. Box Number i	s Not Acceptab	e)		
SUITE 1100 ORLANDO FL 32801						83	*						
ONDAINDO PL 32001							01:				1	1 = -	
							City				FL 85	1	
11. Pursuant	to the provisions	of Sections 607.0502 or both, in the State cand accept the obligat	and 607.1508,	Florida Statu	tes, the a	bove	e-named	d corpo	ration submits this stat	ement for the pr	urpose of cha	nging its	registered
agent. I a	m familiar with, a	and accept the obligat	ions of, Section	607.0505, FI	orida Sta	tutes	3.	,,,,,,,,	To board of amostoro.	,	. In our or promise		
SIGNATURE	Signature, typed or pr	inted name of registered agent	and title if applicable	(NO)	F: Registere	d Ane	nt signature	e required	when reinstating)		DATE		
12.		OFFICERS AND			13.				ADDITIONS/CHAN	IGES TO OFFICE		ECTOR!	S IN 12
TITLE	D			DELETE	1.1 T	ITLE						Change	Addition
NAME	BOLDMAN,				1.2 N	AME							
STREET ADDRESS	OVIEDO FL	DRNINGSIDE CT.					ADDRESS						
CITY-ST-ZIP TITLE	D OVIEDO PL	32/03	· · · · · · · · · · · · · · · · · · ·	DELETE	2.1 T	ITY-S	₹-ZIP	 	- Agenting William		12/	Change	Addition
NAME	MOSELER.	JOHN-ERIK	•		2.2 N			Ì			2	-nungo	
STREET ADDRESS	1201 CONS	STANTINE ST.			2.3 \$	TREET	ADDRESS	325	sa Bellingha lando, EL.	am Or.	1		
CITY-ST-ZIP	ORLANDO	FL 32825			2.40	HTY-9	ST-ZIP	OC	laudo EL	<u> </u>			
TITLE			Ĺ	DELETE	3.1 T	ILE						Change	Addition
NAME					3.2 N								
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP TITLE				DELETE	3.4. (4.1 T		ST- 21P	 				Change	Addition
NAME			_		4.21						_	•	
STREET ADDRESS					4.3 S	TREET	ADDRESS						
CITY-ST-ZIP					4.4 C	11Y-S	T-ZIP	<u> </u>					
TITLE			Ĺ	DELETE	5.1 T						[Change	☐ Addition
NAME SZOCEZ ADDOZGO					5.2 N		4000000	[
STREET ADDRESS							ADDRESS	1					
CITY-ST-ZIP TITLE				DELETE	6.1 T	ITY-S ITLE	1-211	+				Change	Addition
NAME			_		6.2 N						- -	-	
STREET ADDRESS							ADDRESS	l					
CITY-ST-ZIP					6.4 C	11Y-S	T-21P						

14. I do 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 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, or on an altechment with an address.