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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000020146 (2)

THE PLANET INK COMPANY										
									HAR BURKAN KAN	
Principal Place	Principal Place of Business Mailing Address					7	- I HADDINGDE KIN TANDA DIKIT KANTIL BOYKE HOKIT BOYKE BOYKE BOYAR KANTIL BIRLIK OLILIK KANTIL HADI			
1879 N TAMIA NO FT MYERS		1873 N TAMIAMI TR NO FT MYERS FL 33803			DO NOT WRITE IN THIS SPACE					
						3.	Date Incorporated or Qualified	31 ACE	<u> </u>	
							03/05/1996			
2. Principal Pla	2. Principal Place of Business		2a, Mailing Address			4.	FEI Number	T	Applied For	
21	21		26				NOT APPLICABLE	[Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	Certificate of Status Desired	• •	.75 Additional		
City & State		City & State				6.	Election Campaign Financing Trust Fund Contribution		5.00 May Be	
Zip 24	Country 25	Zip 29	30	untry		8.	This corporation owes or has paid the corporation owes or has paid the corporated Tax due June 30.	urrent ye		
9. Name and Address of Current Registered Agent						10.	Name and Address of New Registered	Agent		
	NSON, MERRILL N			81	Name		-		- : -	
800 HARBOUR OR NAPLES FL 33940					82 Street Address (P.O. Box Number is Not Acceptable)					

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

84 City

SIGNATURE	egistered agont, or boin, in the state of Floridal Su in familiar with, and accept the obligations of, Sect		da Statutes.			
	Signature, typed or printed name of registered agent and title if applic			required when reinstaling)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS	IN 12
TITLE	D	DELETE	1.1 TITLE		Change	■ Addition
NAME	CROUCH, RAY W		1.2 NAME			
STREET ADDRESS	1884 FLORRIE CT		1.3 STREET ADDRESS			
CITY-ST-ZIP	NO FT MYERS FL 33917		1.4 CITY - ST - ZIP			
TITLE	D	DELETÉ	2.1 TITLE		Change	Addition
NAME	SHIFRIN, SHARI		2.2 NAME			
STREET ADDRESS	9061 SAN CARLOS BLVD		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT MYERS FL 33912		2.4 CITY-ST-ZIP			
TITLE	D	DELETE	3 1 TITLE		Change	Addition
NAME .	WALLERSTEIN, PETER		3.2 NAME			
STREET ADDRESS	115 S TOPANGA CANYON BLVD		3.3 STREET ADDRESS			
CITY-ST-ZIP	TÓPANGA CA 90290		3.4. CITY-ST-ZIP			
TITLE	D	DELETE	4.1 TITLE		Change	Addition
NAME	LEONDARD, JOHN A		4. 2 NAME			
STREET ADDRESS	115 S TOPANGA CANYON BLVD		4.3 STREET ADDRESS			
CITY-ST-ZIP	TOPANGA CA 90290		4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			į
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME	\		6.2 NAME			
STREET ADDRESS	. ^		6.3 STREET ADDRESS			

nation supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information but 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 soration of the recover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ged, or an an attacurrent with an address. 14. I hereby certify that the indicated on this annual

DAY III MANUAL MONDO

FILED

May 12 1998 8:00am

Secretary of State

Applied For Not Applicable