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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARAMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600030484 (5)

PLANETARY PUBLISHING COMPANY

FILED Apr 18 1997 8:00am Secretary of State



Principal Place of Business Mailing Address					# (DD)(DD) (ID IZ(ID D)(K) BOIN BOIN BEIN BD)BE (IN) OD(I) DIGHT IDSH DIGH IND				
2012 CASTLE OAK AVENUE ORLANDO FL 32808		POST OFFICE BOX 681087 ORLANDO FL 32868-1087							
						3. Date Incorporated or Qualified 04/08/1996	3a. Date	of Last R	eport
2. Principal P	Place of Business	2a. Mailing Address 26			4. FET Number 593371919	Applied For Not Applicable			
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired		\$8.75 Fee Re	Additional equired	
City & State		City & State	City & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees		
Zip	Country	28] Zip		Country	. 	Trust Fund Contribution 8. This corporation has liability for i			
24	25	29	30	,			Yes 🔲		. 100.002,
	9. Name and Address of Curre				,	10. Name and Address of New Re	gistered Ag	ent	
AME	RILAWYER CHARTERED			81	Name				
343 ALMERIA AVENUE CORAL GABLES FL 33134				82 Street		tress (P.O. Box Number is Not Acceptab	le)		
				83					
•				84	City		FL	85 Zip	Code
		007.4500.65	- 60.00		L	poration submits this statement for the p		honoina i	e registere
12.		ND DIRECTORS		13.		ored when reinstating) ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	
TITLE	PSTD	DEI	ETE	1.1 TITLE] Change	Addition
NAME	CADWALLADER, DARRELL J 2912 CASTLE OAK AVENUE			1.2 NAME	4000000				
STREET ADDRESS CITY-ST-ZIP	ORLANDO FL 32808			1.3 STREET 1.4 GHY- S	ADDRESS				
TITLE		Dt Dt		2.1 111LF				Change	Additi
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREF	I ADDRESS	•			
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CITY-ST-ZIP TITLE NAME		DE	LETE	5.4 CITY-: 6.1 TITLE 6.2 NAME	S1 - 7+P			☐ Change	Additi
CITY-ST-ZIP TITLE		DE	LETE	5.4 CITY-: 6.1 TITLE 6.2 NAME	S1-ZIP		Γ	☐ Change	Additi

4. 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 eath; 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 attachment with an address.

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Onsell Olader Oak

3.22.97 407.522.5354