

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

**FILED**  
**May 04, 1999 8:00 am**  
**Secretary of State**

05-04-1999 90153 002 \*\*\*150.00

**DOCUMENT # P96000057992**

1. Corporation Name  
**PLAN BEATS, INC.**

Principal Place of Business  
12461 SW 95 TERR  
MIAMI FL 33186  
US

Mailing Address  
12461 SW 95 TERR  
MIAMI FL 33186  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**07/10/1996**

4. FEI Number

**65-0690608**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

**SCHERE, LESLIE A**  
**1865 BRICKELL AVENUE**  
**SUITE A-207**  
**MIAMI BEACH FL 33129**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VDS** ☐ DELETE  
NAME **SCHERE, SETH J**  
STREET ADDRESS **15391 S DIXIE HWY., #59**  
CITY-ST-ZIP **MIAMI FL**

TITLE **VD** ☐ DELETE  
NAME **HARRIS, GARRIET D**  
STREET ADDRESS **10350 S.W. 176TH STREET**  
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **D** ☐ DELETE  
NAME **SCHERE, JACOB D**  
STREET ADDRESS **600 J STREET, #200**  
CITY-ST-ZIP **MARTINEZ CA**

TITLE **PD** ☒ DELETE  
NAME **RIVERA, JAVIER A**  
STREET ADDRESS **12461 SW 95 TERR**  
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PVDS** ☒ Change ☐ Addition  
1.2 NAME **Seth Schere J**  
1.3 STREET ADDRESS **20572 SW 114 ave**  
1.4 CITY-ST-ZIP **Miami, FL 33189**

2.1 TITLE **VDT** ☒ Change ☐ Addition  
2.2 NAME **Harris, Garriet D**  
2.3 STREET ADDRESS **11412 SW BOOKER T. WASHINGTON BLVD**  
2.4 CITY-ST-ZIP **Miami, FL 33176**

3.1 TITLE **D** ☒ Change ☐ Addition  
3.2 NAME **SCHERE, JACOB**  
3.3 STREET ADDRESS **7150 SW 106 ST.**  
3.4 CITY-ST-ZIP **Miami, FL 33156**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/28/99**  
Date

**305.596.7031**  
Daytime Phone #

CR2E034 (11/98)

0266923