

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

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90226 033 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000073287

1. Corporation Name  
PLANET FINANCIAL CORP.

Principal Place of Business

2850 STIRLING RD #G  
HOLLYWOOD FL 33020  
US

Mailing Address

2850 STIRLING RD #G  
HOLLYWOOD FL 33020  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/04/1996

4. FEI Number  
65-0693178

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 9315 N. MIAMI AVE  
Suite, Apt. #, etc.

2a. Mailing Address

26 330 SE. 20<sup>TH</sup> AVE.  
Suite, Apt. #, etc.

22 City & State  
23 MIAMI SHORES, FL.

27 City & State  
28 DEERFIELD BCH, FL.

24 Zip 33150  
25 Country FLA  
29 Zip 33441  
30 Country BROWARD

9. Name and Address of Current Registered Agent

INCORPORATORS PLUS, INC.  
1214 N. UNIVERSITY DRIVE  
PLANTATION FL 33322

10. Name and Address of New Registered Agent

81 Name ROBERT E. HUDDLESTON  
82 Street Address (P.O. Box Number is Not Acceptable)  
330 SE. 20<sup>TH</sup> AVE APT. 208  
83 DEERFIELD BEACH  
84 City  
85 Zip Code FL 33441

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 Robert E. Huddleston

DATE 4/22/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	HUDDLESTON, ROBERT J	2850 STIRLING RD #G	HOLLYWOOD FL 33020	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 2 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert E. Huddleston  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 4/22/99

954-426-0327  
DAYTIME PHONE #

CR2E034 (1/98)