SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000052052 (2)

PLANET & BALL, INC.

Aug 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address SILVERMILL PLAZA SILVERMILL PLAZA 11226 W. HILLSBOROUGH AVE 11226 W. HILLSBOROUGH AVE **TAMPA FL 33635** DO NOT WRITE IN THIS SPACE **TAMPA FL 33635** 3. Date Incorporated or Qualified 06/12/1997 2. Principal Place of Business 4. FEI Number 2a. Malling Address Applied For 26 11236 11236 W. H. W. Berough Not Applicable Suite, Apt. #, etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be TAMPA, FL 28 Trust Fund Contribution Added to Fees Zip **33435** Country 8. This corporation owes or has paid the current year Intangible 25 10 711 Bar 4 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name POWELL, BETTY 8860 OAK-CIRCLE Street Address (P.O. Box Number is Not Acceptable) TAMPA PL 33615 11236 W. HWIBSOUGH AM City Dompa 85 Zip Code 33 630 84 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. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1.1 TITLE DELETE becretary NAME 1.2 NAME STREET ADDRESS 13 STREET ADDRESS 226 m CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE 2 2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIF 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 5.1 TITLE DELETE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE ___ DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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.