PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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

02-26-1999 90030 009 ***150.00

DOCUMENT #	P98000049384
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1. Corporation Name

PLANETARY ENTERPRISES, INC.

Principal Pl	ace of	Business
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Mailing Address



4698 NW 103 AVENUE 4698 NW 103 AVENUE SUNRISE FL 33351 SUNRISE FL 33351				DO NOT WRITE IN TH	S SPAC	E		
					3. Date Incorporated or Qualifed 06/01/1998			
2. Prir	ncipal Place of Business	2a. Mailing Address			4. FEI Number	L	Applied For	
21		26			65-0457365	<u> د (بسيدنتن</u>	Not Applicable	
Suit	te. Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	•	.75 Additional ee Required	
	/ & State	City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
Zíp 24	Country 25	Zip 29 3	Country	_	This corporation owes the current year I Personal Property Tax.	ntangible Ye	_	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
	GREENE, WILLIAM		81	Name				
4698 NW 103 AVENUE		82	82 Street Address (P.O. Box Number is Not Acceptable)					
	SUNRISE FL 33351		83			_		
			84	City	F	L 85	Zìp Code	
off	ursuant to the provisions of Sections 607.0 fice or registered agent, or both, in the Stat tent. I am familiar with, and accept the obli-	te of Florida. Such change was aut	horized by	-named corp the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changi ointment	ng its registered as registered	

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
		····	ADDITIONS/CHANGES TO		D DIRECTOR	E IN 12	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO	OFFICERS AN			
TITLE	D DELETE	1.1 TITLE			☐ Change	Addition	
NAME	FUSARO, ALBERT	1.2 NAME					
STREET ADORESS	10044 NW 46 STREET	1.3 STREET ADDRESS	-		-	1	
CITY-ST-ZIP	SUNRISE FL 33351	1.4 CITY-ST-ZIP					
TITLE	D DELETE	2.1 TITLE			☐ Change	Addition	
NAME	LEONESCU, RICHARD	2.2 NAME					
STREET ADDRESS	10044 NW 46 STREET	2.3 STREET ADDRESS					
CITY-ST-ZIP	SUNRISE FL 33351	2. 4 CITY-ST-ZIP					
TITLE	DELETE	3.1 TITLE			☐ Change	Addition	
NAME		3.2 NAME				-	
STREET ADDRESS		3 3 STREET ADDRESS					
CITY-ST-ZIP		3.4. CITY-ST-ZIP					
TITLE	☐ DELETE	4.1 TITLE			☐ Change	Addition	
NAME		4. 2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS				}	
CITY-ST-ZIP		4.4 CiTY-ST-ZiP					
TITLE	☐ DELETE	5.1 TITLE		;	☐ Change	☐ Addition	
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP			<u>. </u>		
TITLE	☐ DELETE	6.1 TITLE			☐ Change	☐ Addition	
NAME		6.2 NAME	•			{	
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		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 supplementar 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 of 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: