2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000094966

1. Entity Name

PLANET C, INC.

Principal Place of Business Mailing Address % LAW OFFICE OF LEWIS K. HANNA. P.A. % LAW OFFICE OF LEWIS K. HANNA. P.A. 152 NW 20 ST 152 NW 20 ST **BOCA RATON FL 33431** BOCA RATON FL 33431-7949

FILED Apr 14, 2000 8:00 am Secretary of State

04-14-2000 90085 046 ***150.00



2. Principal Place of Business		3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State	9	City & State			4. FEI	Number	65-0882	055		Applied Not Ap	for plicable	
Zip	Country	Zip	Zip Country							5 Additional Required		
	7. Name and Address of New Registered Agent											
DONOHUE, BACHAEL Richard 159 NW 70 ST STE 508 BOCA RATON FL 33487				Name Street Address (P.O. Box Number is Not Acceptable)								
				City					FL Zip	Code		
8. The above	named entity submits this statement f			<u> </u>	· •	ترت ب يحسي	the State of	Florida.	TE		_	
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			o State	IO. Election	n Campaign fund Contrib	ution.	□ A	5.00 M dded to F	ees	
11.	OFFICERS AND	DIRECTORS	12.		ADDI	IONS/CH	ANGES TO	OFFICERS	AND DIREC	TORS IN	11 .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME DONOHUE, DAWN STREET ADDRESS 159 NW 70 ST STE 508			E EET ADDRESS -ST-ZIP					☐ Cha	nge 🗀	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			E EET ADDRESS -ST-ZIP				-	☐ Cha	nge 🗀	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	energia incipe in the day	□ Delete		l l					Cha	nge 🗀] Addition	

13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: