

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000042023

1. Entity Name

PLANET 1 ENTERPRISES CORP.

R

Principal Place of Business

Mailing Address

701 BEVILLE ROAD  
SOUTH DAYTONA FL 32119

701 BEVILLE ROAD  
SOUTH DAYTONA FL 32119-1823

2. Principal Place of Business

945 Pelican Bay Drive  
Suite, Apt. #, etc.

3. Mailing Address

945 Pelican Bay Drive  
Suite, Apt. #, etc.

City & State

Daytona Beach FL

City & State

Daytona Beach FL

4. FEI Number

593595447

Applied For

Not Applicable

Zip

32119

Country U.S.A.

U.S.A.

Zip

32119

Country

U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete  
NAME BROWN, NEIL M DR.  
STREET ADDRESS 701 BEVILLE ROAD  
CITY-ST-ZIP SOUTH DAYTONA FL 32119

TITLE VD ☒ Delete  
NAME HALLETT, GEORGE  
STREET ADDRESS 701 BEVILLE ROAD  
CITY-ST-ZIP SOUTH DAYTONA FL 32119

TITLE SD ☒ Delete  
NAME DIGAETANO, JIM  
STREET ADDRESS 701 BEVILLE ROAD  
CITY-ST-ZIP SOUTH DAYTONA FL 32119

TITLE TD ☐ Delete  
NAME ROSSI, JOHN  
STREET ADDRESS 701 BEVILLE ROAD  
CITY-ST-ZIP SOUTH DAYTONA FL 32119

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRES ☐ Change ☐ Addition  
NAME mehul Pandya  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V.P. ☐ Change ☐ Addition  
NAME Nirav Pandya  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SEC. ☐ Change ☐ Addition  
NAME John Rossi  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TREAS. ☐ Change ☐ Addition  
NAME Nirav Pandya  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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:

Mehul J. Pandya  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/00

Date

904-767-8947

Daytime Phone #

CR2E034 (9/99)