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

PROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$85486

(6)

1. Corporation PLANET		OOD (CHIC	CAGO), IN	C.	(3)								
Principal Place of Business Mailing Address										fet ibibi bitti bibbi tbi			UIBII IBUI
7380 SAND LAKE ROAD 7380 SAND LAKE ROAD SUITE 600 SUITE 600 ORLANDO FL 32819 ORLANDO FL 32819-5259													
									3. Date Inco 10/07/1	orporated or Qualif		Date of Last R /12/1996	lopart
2. Principal P	lace of Busin	noss		2a. Mailing Address					4. FEI Numb				oplied For
21				26					59-30	96421		No	ot Applicable
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate	e of Status Desired	3 🗆		Additional equired
City & Stat	е			City & State					6. Election Campaign Financing \$5.00 May Be				
23				28					Trust Fund Contribution Added to Fees				
Zip	Country		1			⊢ ₁	Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	[25] 9. Name and Address of Curren			29	30				Florida St			No No	
1440			or Current He	giste	red Agent		il-	Name	10. Name an	d Address of Nev	w Registered	Agent	
MARSHALL, BYRD F., JR.						UI Name							
201 EAST PINE STREET SUITE 1200					8:	5	Street Add	tress (P.O. Box N	umber is Not Acce	eptable)			
ORLANDO FL 32801							3						
ONDANDO I C OZOOT							_ -						
						8.	4	City			FI	_ 85 Zip :	Code
11. Pursuant office or r agent. I a	to the provis registered ag im familiar w	ions of Sections ent, or both, in th, and accept	607.0502 ar the State of f the obligation	nd 60. Torida is of,	7.1508, Florida Statut a. Such change was a Section 607.0505, Flo	es, the abo authorized t orida Statut	vo-i by t	named cor the corpora	poration submits ation's board of d	this statement for rectors. I hereby a	the purpose occept the ap	of changing it pointment as	s registered registered
SIGNATURE													
12.	Signature, typed	or printed name of n	DERS AND D			13.	geri	upen enuteriga	uired when reinstating)	S/CHANGES TO C	DATE DEELCE BS AN	ID DIRECTOR	RS IN 12
TITLE	PD				DELETE	1.1 TITLE						X Change	Addition
NAME	EARL, RO	BERT				1.2 NAME		ĺ					
STREET ADDRESS 7380 SAND LAKE ROAD SUITE				650			1.3 STREET ADDRESS						
CITY-ST-ZIP	ORLAND	O FL				1.4 O(1Y-	ST -	-ZIP	Orlando, Fl	32819			
TITLE	DC				DELETE	2.1 THLE			•			Change	Addition
NAME	BARISH,					2.2 NAME				,			Į.
STREET ADDRESS		7 ST. 13 FLR	1			2.3 STREI	ET A	DDRESS					
CITY-ST-ZIP	NEW YO	RK NY			1 50.54	2 4 CHY			11-12			IV a	7.100
TITLE	TEVP	IE TUONAS			☐ DELETE	3 1 11/11		'	VITID			Changé	☐ Addilion
NAME		IE, THOMAS ND LAKE RD	# 050			3.2 NAME							
STREET ADDRESS	ORLAND		¥00U			3.3 STREI			vilando El	22610			
CITY-ST-ZIP TITLE	SVP	V (L			DELETE	3.4. CITY 4.1 TIELE		- t C	orlando FL	32011		Change	Addition
NAME		N, SCOTT E.			La Diceie	4. 2 NAM			(ISID			Pag Silvings	L. J. Wallion
STREET ADDRESS		ND LAKE RD	#6 50			4.3 \$TRE		DORESS					
CITY-ST-ZIP	ORLAND	Ö FL				4.4 CITY			rlando, FL	32819			
TITLE					DELETE	5 1 TITLE			·			Change	Addition
NAME						5.2 NAME		İ					
STREET ADDRESS						5.3 STREE	EL AI	DDRESS					
CITY-ST-ZIP						5.4 CITY	S1·	ZIP					
TITLE					DELETE	6.1 TITLE						Change	Addition
NAME	†					6.2 NAME		Į					
STREET ADDRESS						6.3 STRE	ET AI	DDRESS					

14. I do 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 eath; 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.

FILED

May 14 1997 8:00am

Secretary of State