CTIONS LEFORE COMPLETING THIS FORM! PM 2: 24 PLEASE READ VL INSTRI

FILED

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DOC	H	N۸	F	NT	. #
1 1 1 1 1 1	L J	IVI			***

1. Corporation Name

PLANET ENTERTAINMENT CORPORATION

221 GOOLSBY BOULEVARD 221 GOOLSBY BOULEVARD

2. Principal Office 221 GOOLS	e Address BY BOULEVARD	3. Mailing Office Address 221 GOOLSBY BOULEVARD		21 05/24	
Suite, Apt. #, etc.	<u> </u>	Suite, Apt. #, etc	•	4- Date Inco	
City & State DEERFIELD	BEACH, FL	City & State DEERFIELD BEACH, FL		5. FEI Numi 3304717	
Zip 33442	Country USA	Zip 33442	Country	6. CERTIFICA	

00037057512 4/04--01101--007 **1393.75

4. Date Incorporated or Qualified To Do Business in Florida 06/22/1992		
5. FEI Number	Applied For	
330471718	Not Applicable	
6. CERTIFICATE OF STATUS DESIRED 📈 \$8.75 AC	ditional Fee require	

USA		USA	CENTIFICA	TE OF STATUS DESIRED 2	for a Certificate of S	Stat
ii !	7. Name	and Address of Current	Registered Agent			
Name TINA HAMM			•	,	- (
Street Address (P.O. Box Numb 221 GOOLSBY BOUL	er is Not Acceptable) EVARD				24	مکا
Suite, Apt., #, Etc.					6/28/10	1
City DEERFIELD BEACH				State Zip Code 33442		

8. I, being appointed th	e registered agent of the above named corporation, am familiar with an	d accept the obligations of section 607.0505 or 617.0503, F.S.
Signature of Registered Agent	Tina Hamm	Date 05/19/2004
	REGISTERED AGENT MUST SIGN	•

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Titles City / State / Zip Officer and/or Director DIREC' KAREN DIAMOND 221 GOOLSBY BOULEVARD DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 SECRE KAREN DIAMOND 221 GOOLSBY BOULEVARD DEERFIELD BEACH, FL 33442 TREAS KAREN DIAMOND 221 GOOLSBY BOULEVARD

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR

05/19/2004

954-427-8777

Daytime Phone #