



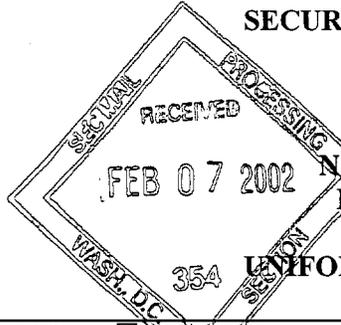
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FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

OMB Approval OMB Number: 3235-0076 Expires: November 20, 2001 Estimated average burden hours per response 16.00



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial DATE RECEIVED

Name of Offering Confidential Private Offering Letter Filing Under (Check box(es) that apply: Rule 504 Rule 505 Rule 506 Section 4(6) ULOE) Type of Filing: New Filing Amendment

21-39577

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer Name of Issuer PlantFind.com, Inc. Address of Executive Officers Telephone Number (561) 752-2250 Address of Principal Business Operations Telephone Number Same Brief Description of Business: The Company was organized to be the dominant business-to-business electronic commerce site for the Green Industry...

PROCESSED

Type of Business Organization corporation limited partnership, already formed other (please specify): Actual or Estimated Date of Incorporation or Organization: 03 99 Actual Estimated Jurisdiction of Incorporation or Organization: DE

FEB 13 2002

THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal: Who Must File All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File A notice must be filed no later than 15 days after the first sale of securities in the offering. Where To File U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549 Copies Required Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Information Required A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer ;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **Ferraro, Michael A.**

Business or Residence Address (Number and Street, City, State, Zip Code)

2240 W. Woolbright Road, Suite 323, Boynton Beach, FL 33426

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **Ferraro, Sr., Frank C.**

Business or Residence Address (Number and Street, City, State, Zip Code)

2240 W. Woolbright Road, Suite 323, Boynton Beach, FL 33426

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **Ferraro, Jr., Frank C.**

Business or Residence Address (Number and Street, City, State, Zip Code)

8150 Serendipity Drive, Charlotte, NC 28277

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **Centolella, Richard**

Business or Residence Address (Number and Street, City, State, Zip Code)

8768 NW 6th Street, Coral Springs, FL 33071

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **Costich, Peter**

Business or Residence Address (Number and Street, City, State, Zip Code)

60-A Union Avenue, Center Moriches, NY 11934

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **Stone, Jr., Edward D.**

Business or Residence Address (Number and Street, City, State, Zip Code)

1512 E. Broward Blvd., Fort Lauderdale, FL 33301

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **McGuire, Richard T.**

Business or Residence Address (Number and Street, City, State, Zip Code)

56 Scott Hill Road, Cambridge, NY 12816

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual): **Dr. George Good**

Business or Residence Address (Number and Street, City, State, Zip Code)

412 Dryden-Vingil Road, Dryden, NY 13053

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual):

Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING

- | | Yes | No |
|---|-------------------------------------|-------------------------------------|
| 1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?
Answer also in Appendix, Column 2, if filing under ULOE. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. What is the minimum investment that will be accepted from any individual? | <u>\$25,000</u> | |
| | Yes | No |
| 3. Does the offering permit joint ownership of a single unit? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. | | |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States)..... All States

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]
 [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]
 [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]
 [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States)..... All States

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 [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]
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Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States)..... All States

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 [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt.....	\$0	\$0
Equity.....	\$0	\$0
	<input type="checkbox"/> Common <input type="checkbox"/> Preferred	
Convertible Securities (including warrants).....	\$0	\$0
Partnership Interests.....	\$0	\$0
Other (specify): Units consisting of 25,000 shares of Common Stock plus warrants to purchase 12,500 additional shares of Common Stock. The purchase price for each Unit is \$25,000.	\$500,000	\$0
Total (assumes sale of all 20 Units).....	\$500,000	\$0

Answer also in Appendix, Column 3, if filing under ULOE

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors.....	0	\$0
Non-accredited Investors.....	0	\$0
Total (for filings under Rule 504 only).....	N/A	N/A

Answer also in Appendix, Column 4, if filing under ULOE

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of Offering	Type of Security	Dollar Amount Sold
Rule 505.....	N/A	\$
Regulation A.....	N/A	\$
Rule 504.....	N/A	\$
Total.....	N/A	\$

- 4.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees.....	<input type="checkbox"/>	\$0
Printing and Engraving Costs.....	<input type="checkbox"/>	\$0
Legal Fees.....	<input checked="" type="checkbox"/>	\$1,000
Accounting Fees.....	<input checked="" type="checkbox"/>	\$500
Engineering Fees.....	<input type="checkbox"/>	\$0
Sales Commissions (Specify finder's fees separately)**.....	<input type="checkbox"/>	\$0
Other Expenses (identify: Blue Sky Filing Fees and other blue sky expenses).....	<input checked="" type="checkbox"/>	\$1,000
Total.....	<input checked="" type="checkbox"/>	\$2,500

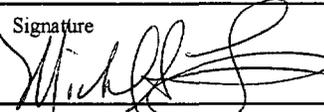
C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS (continued)

- 4b Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$497,500
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above.

	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees (personnel development)	<input checked="" type="checkbox"/> \$50,000	<input checked="" type="checkbox"/> \$25,000
Purchase of real estate	<input type="checkbox"/> 0	<input type="checkbox"/>
Purchase, rental or leasing and installation of machinery and equipment	<input type="checkbox"/> 0	<input type="checkbox"/>
Construction of leasing of plant buildings and facilities	<input type="checkbox"/> 0	<input type="checkbox"/> 0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<input type="checkbox"/> 0	<input type="checkbox"/> 0
Repayment of indebtedness	<input checked="" type="checkbox"/> \$50,000	<input checked="" type="checkbox"/> \$75,000
Working capital	<input type="checkbox"/> 0	<input checked="" type="checkbox"/> \$297,500
Other (specify)	<input type="checkbox"/> 0	<input type="checkbox"/> 0
Column Totals	<input checked="" type="checkbox"/> \$100,000	<input checked="" type="checkbox"/> \$397,500
Total Payments Listed (column totals added)	<input checked="" type="checkbox"/> \$497,500	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502.

Issuer (Print or Type) PlantFind.com, Inc.	Signature 	Date February 1, 2002
Name of Signer (Print or Type) Michael A. Ferraro	Title of Signer (Print or Type) Director and President	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).