
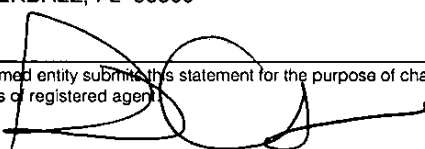
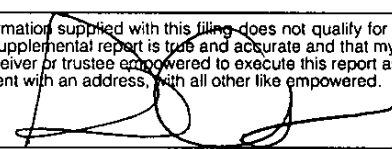


2006 FOR PROFIT CORPORATION ANNUAL REPORT

| | | | | | |
|--|---|---|---|---|--|
| DOCUMENT # P03000065443 1. Entity Name PALM BEACH RESORT HOLDINGS, INC. | | | |  | |
| Principal Place of Business 3015 NO. OCEAN BOULEVARD SUITE 121 FORT LAUDERDALE, FL 33308 | | | Mailing Address 3015 NO. OCEAN BOULEVARD SUITE 121 FORT LAUDERDALE, FL 33308 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | | 3. Mailing Address Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | | Country | | Zip | |
| Country | | City & State | | City & State | |
| 4. FEI Number 20-0117743 | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent WASSERSTORM, ELLEN ESQ GREENSPOON MARDER, P.A. 100 W CYPRESS CREEK ROAD SUITE 700 FORT LAUDERDALE, FL 33309 | | | 7. Name and Address of New Registered Agent Name REBECCA A FOSTER Street Address (P.O. Box Number is Not Acceptable) 3015 N OCEAN BLVD STE 121 FT LAUDERDALE FL 33308 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE  Rebecca A Foster 4/27/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PS FOSTER, REBECCA A 3015 NO. OCEAN BOULEVARD, SUITE 121 FORT LAUDERDALE, FL 33308 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD FOSTER, REBECCA A] SAME | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPT LANDAU, MARC 3015 NO. OCEAN BOULEVARD, SUITE 121 FT. LAUDERDALE, FL 33308 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VTO LANDAU, MARC J.] SAME | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 900076202239 08/14/06--01036--004 **\$495.00 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE:  Rebecca A Foster 4/27/06 904/563-2444 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | | | | |

FILED

06 MAY 11 PM 3:25

SECRET
TALLAHASSEE, FLORIDA



04272006 Chg-P CR2E034 (11/05)