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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # <b>S21750</b> (AL PALM, INC.	(2)		-		 	1 <b>4 1 3 1 3 1 4 1 1</b>	:#A	1114 1114 ·
Principal Place		Mailing Address							
STE. #208 Palm Beach F US	FL 33480	STE. #206 PALM BEACH FL 33480-411 US	7			3. Date Incorporated or Qualified 12/31/1990		te of Last Re 22/1996	port
2. Principal Pla	ace of Business	26. Mailing Address			· · · · · · · · · · · · · · · · · · ·	4. FEI Number 52-1709670	UE/E	Apr	plied For t Applicable
Suite Apt. (	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A Fee Rec	II.
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added to	
Zip 24	Gountry 25 9, Name and Address of Current		Coul	ntry	,	This corporation has liability for Florida Statutes      Name and Address of New Re	Yes 📓	No	199.032,
	P. ERNST-LUDWIG ROYAL PALM WAY LIMITED PAF		Į.		Name				
400	ROYAL PALM WAY, SUITE 206	MENOAIF	Į	82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
PALI	M BEACH FL 33480				City			<b>85</b> Zip C	Code
11. Pursuant I	to the provisions of Sections 607.0502	and 607 1508, Florida Statute	s, the ab	oove-	named corpo	oration submits this statement for the p	FL ourpose of	changing its	s registered
agent Lar	egistored agent, or both, in the State of familiar with, and accept the obligation	tions of, Section 607.0505, Flo	rida Stati	utes.	·	ŕ	prine appo	Jintinent as i	egistered
SIGNATURE	Signature, typed or pointed name of registered ager OFFICERS AND		Registered	Agent	signature require	d when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTORS	S IN 12
TITLE	PD	DELETE	1,1 111					Change	Addition
NAME Street Address	KIPP, ERNST-LUDWIG 235 DUNBAR ROAD		1.2 NA 1.3 ST		DDRESS				
C:TY - ST - ZIP	PALM BCH FL	The state	_	TY-ST-	ZIP			77.05	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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TITLE				1 TITLE				Change	Addition
NAME			6 2 NA	AME					
STREET ADDRESS			6.3 ST	IREET A	IDDRESS				
CITY-S1-ZIP	by certify that the information supplied	with this bline door not evolid		TY-ST-		in Section 119 07/3Vil Florida Statute	s   further	certify that	the
informatio Lam an of	by certify that the information supplied in indicated on this annual report or si flicer or director of the corporation or in Block 12 or Block 13 if changed, or	upplemental annual report is tr the regeiver or trustee empow	ue and a ered to e	execu	ate and that it ite this report	my signature shall have the same leg- as required by Chapter 607, Florida	al effect as Statutes; a	s if made und no that my n	der oath; that name
SIGHAN	URE: SIGNATURE AND TYPED OR	EINST-I	HAWA	<b>S</b>	Kipp	1/10/97 50	61-65	5-340 aylime Phone II	66