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 # 144586

(5)

MOSELEY'S-PALM BEACH, INC.

Principal Place of Business Mailing Address						AF DIRRA DIDA BIBII DIDA	8 1811 8181 1881	
738 LINCOLN ROAD MALL 738 L		738 LINCOLN ROAD MALL MIAMI BEACH FL 33139-288	LINCOLN ROAD MALL					
					 Date Incorporated or Qualified 10/01/1945 	3a. Date of L 03/01/19		
2. Principal Pi	lace of Business	2a. Malling Address 26			4, FEI Number 59-0538563		Applied For Not Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired		.75 Additional ee Required	
City & State City & State 23 28					6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
Zip	Country Zip Cou 25 29 30			у	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
= 11	9. Name and Address of Curre				10. Name and Address of New R	egistered Agent		
MOS	SELEY, JOSEPH A. JR.		81	I Name				
4445 ISLAND ROAD			82	82 Street Address (P.O. Box Number is Not Acceptable)				
BAY	POINT FL 33137		83	3				
1			84	1 City		FL 85	Zip Code	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig	e of Florida. Such change was au	ithorized b	by the corpora	poration submits this statement for the tion's board of directors. I hereby acc	nurnee of chang	ging its registered ant as registered	
SIGNATURE	Signature, typed or printed name of registered a	oni and title if applicable (NOIE:	Registered Ar	pent signature requi	ired when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRE	CTORS IN 12	
TITLE	PD	DELETE 1.1 TO				CI	nange 🔲 Addilion	
NAME	LAGANI DIA TANDALI A		1.2 NAME					
STREET ADDRESS	4446 101 4315 5046		1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	BAY POINT FL 141		1.4 CITY-	-\$1 - ZIP				
TITLE	VP					☐ CI	nange 🔲 Addition	
NAME	Accord managed to		22 NAME					
STREET ADDRESS	738 LINCOLN ROAD 23		2 3 S1RE	ET ADDRESS				
CITY-ST-ZIP			2 4 City	- ST - ZIP				
TITLE	- 1		3.1 TITLE			☐ CH	nange 🔲 Addition	
NAME	MOSELEY, ROBERT G.		3.2 NAME					
STREET ADDRESS	738 LINCOLN ROAD		3 3 STREE	ET ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL		3.4. CITY	-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			L Ct	nange L Addition	
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STREI	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY-		<u> </u>	——————————————————————————————————————	Laster -	
TITLE		☐ DELETE	5.1 TITLE	ì		∐ Cr	nange 🔲 Addition	
NAME			5.2 NAME					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP	<u></u>	ח הרובזר	5.4 CITY-			Cr	hange Addition	
TITLE		DELETE	6.1 TITLE	1		L., (1	range 🗀 Aportion	
NAME			6.2 NAME	i				
STREET ADDRESS	,			ET ADDRESS				
CULTA GA AID			■ K PHV	. S.L. 71P				

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 oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapters on an adachment with an address.

FILED

Apr 25 1997 8:00am

Secretary of State