

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 250469

(4)

PALM BEACH AUTO SPRING COMPANY



1. Name of Corporation

324 SUNSHINE ROAD
WEST PALM BEACH FL 33411
US

2. Mailing Address

324 SUNSHINE ROAD
WEST PALM BEACH FL 33411
US

3. Date of Incorporation or Qualification

2a. Mailing Address

21. State: April 1961

26. State: April 1961

22. City and State

27. City and State

23. Zip

28. Zip

24. Country

29. Country

25. Country

30. Country

9. Name and Address of Current Registered Agent

GOLD, MARC J
% PALM BEACH AUTO SPRING COMPANY
324 SUNSHINE ROAD
WEST PALM BEACH FL 33411

3. Date of Incorporation or Qualification

09/01/1961

3a. Date of Last Report

04/04/1995

4. FIC Number

59-0939376

Applied For
Not Applicable

5. Certificate of Status Declared

☐

\$8.75 Additional
Fee Required

6. Foreign Corporation Financially
Independent Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statute. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Applicable)

83.

84. City

FL

85. Zip Code

11. I, the undersigned, as Secretary, Treasurer and President of the above-named corporation, submit this statement for the purpose of changing its registered office to the address set forth in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida.

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

14. SIGNATURE

S
ARONOFF, BETTY
324 SUNSHINE ROAD
WEST PALM BEACH FL
PD
GOLD, MARC J.
324 SUNSHINE ROAD
WEST PALM BEACH FL

1. Name
2. Street Address
3. City
4. State
5. Zip
6. Name
7. Street Address
8. City
9. State
10. Zip
11. Name
12. Street Address
13. City
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94. State
95. Zip
96. Name
97. Street Address
98. City
99. State
100. Zip

14. I, the undersigned, certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida. I further certify that I have read the report and that I have signed the report as required by Chapter 607, Florida Statutes, and that my name is printed in the report.

SIGNATURE:

Marc J. Gold

1-22-96

407-798-8900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)