FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90018 024 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 515221

1. Corporation Name

PAUL B.	HENRY OF PALM BEACH	i, INC.							
Principal Place of Business Mailing Address							T EMBERT MEION THUM HERE DEN ESTAD TEN OCO	15 MINN MINN ASOLE O	.1011 41811 1881
236 WORTH AVENUE 236 WORTH AVENUE PALM BEACH FL 33480 PALM BEACH FL 33480							DO NOT WRITE IN TH	IIS SPACE	
							3. Date Incorporated or Qualifed		
							09/28/1976		
Principal Place of Business 2a. Mailing Address							4. FEI Number	H	plied For
21							59-1702248		t Applicable
Suite, Apt. #, etc Suite, Apt. #, atc				ر در کا چا امهیاب در استنباست. ا			5. Certificate of Status Desired	\$8.75 A	Additional - equired
City & State City & State							6. Election Campaign Financing	\$5.00	May Be
23		28					Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Zip Country				8. This corporation owes the current year		_ [
24	25	29	30				Personal Property Tax.	☐Yes	□No
	9. Name and Address of Curre	ent Registered Agent					10. Name and Address of New Register	ed Agent	
UPM	DV DÁLIL D			81	Name			_	
HENRY, PAUL B. 236 WORTH AVENUE				82 Street Ad			ss (P.O. Box Number is Not Acceptable)		
PALM BCH. FL 33480				83					
				84	City			. 85 Zip (Code
						FL []			
11. Pursuant office or re agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Stat m familiar with, and accept the oblig	302 and 607.1508, Florida Statute a of Florida. Such change was al gations of, Section 607.0505, Flor	es, the a uthorized rida Stati	bove i by utes.	e-named the corp	corpor oration	ation submits this statement for the purpose 's board of directors. I hereby accept the ap	pointment as re	gistered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE	: Registered	Agen	t signature r	required v	when reinstating) DATE		
12.		AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO)RS IN 12
TITLE	P . DELETE		1,1 Ⅲ	1,1 TITLE				Change	Addition
NAME	HENRY, PAUL B.		1.2 NAME		Į .			ļ	
STREET ADDRESS	236 WORTH AVENUE		1.3 STREE		ADDRESS				ĺ
CITY-ST-ZIP	PALM BCH. FL		1.4 CIT		Y-ST-ZIP				
TITLE				2.1 TITLE S		Se	ecretary	☐ Change	XXAddition
NAME I	•						anessa Henry		
STREET ADDRESS							36_Worth_Avenue		
CITY-ST-ZIP	PALM BCH. FL			2.4 CITY-ST-ZIP			alm Beach, FL 33480	_	
TITLE				3.1 TITLE			;	☐ Change	☐ Addition
NAME	HENRY, PAUL B.		3.2 N	3.2 NAME		Ì			
STREET ADDRESS	236 WORTH AVENUE		3.3 \$1	REET	T ADDRESS				
CITY-ST-ZIP	PALM BCH. FL		3.4. C		T-ZIP				☐ Addition
TITLE .		☐ DELETE	4.1 TE			1		☐ Change	∐ ∧ααιασιι į
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 S1	REET	TADDRESS	1			
CITY-ST-ZIP			_	TY-S	T-ZIP	₩			Addition
TITLE		☐ DELETE	5.1 TI					Change	- Annuncii
NAME			52 N						
STREET ADDRESS		•			TADORESS	1			
CITY-ST-ZIP			5.4 CI 6.1 TI		I-ZIP	-		Change	Addition
TITLE		☐ DELETE							
NAME				6.2 NAME 6.3 STREET ADDRESS					
STREET ADDRESS			6.3 8	IKEE	HUUKESS	1			

CITY-ST-ZIP 14. I 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 suppliemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

561-655-5850