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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # 68

680167

(4)

D'AVEN PALM, INC.

## FILED Mar 30 1998 8:00am Secretary of State



						<u> </u>	A	
Principal Place of Business Mailing Address						1 (42)(4 B)(4) (5)(1 63)(3) (6)(6) (6)(1) (5)(1)	7:1 BIBIT BIBIT BIBIT BIBIT	EIBIL JABL
9700 COLLINS AVENUE STORE #247 9700 COLLINS AVENUE STORE #2					ORE #247			
BAL HARBOUR FL 33154 BAL HARBOU				FL 33154		DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						07/16/1980		
2. Principal F	lace of Busines	s	2a. Mailing Address			4. FEI Number	Ap	plied For
21			26					t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	Additional
22			27			Certificate of Status Desired     L	Fee Re	quired
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
23			28			Trust Fund Contribution	Added t	
Zip		Country	Zip	Countr	У	8. This corporation owes or has paid t	he current year Inti	angible
24	25 29 30				Personal Property Tax due June 30. 🙀 Yes 🔲 No			
		d Address of Curre	nt Registered Agent		T	10. Name and Address of New Regis	tered Agent	
SA	ini, felix C.			81	Name			
9700 COLLINS AVENUE, STORE #247					82 Street Address (P.O. Box Number is Not Acceptable)			
BAL HARBOUR FL 33154								
				83				
				84	City		85 Zip 0	Code
							FL   "	
	registered agent am familiar with,	t, or both, in the State and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized b orida Statute	y the corporal s.	poration submits this statement for the purp tion's board of directors. I hereby accept the	ne appointment as	registered
SIGNATURE	Signature typed or p	rinted name of registered ag	ent and title if applicable (NOTE	: Registered Ag	ent signature requi	red when reinstating)	DATE	
12.		OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 12
TITLE	DP		☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	SAINI, FELI	X C		1.2 NAME				
STREET ADDRESS				1.3 STREE	et address			
CITY-ST-ZIP	BAL HARBO	DUR, FL 00000		1.4 CITY-1	ST-ZIP			
TITLE	-	DELETE 2		21 TITLE			Change	☐ Addition
NAME				22 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY-ST-ZIP				2. 4 CITY-	ST - ZIP			
TITLE	<u>-</u>		DELETE	3.1 TITLE			☐ Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREE	ADDRESS	•		
CITY-ST-ZIP	L			3.4. CITY -	ST-ZIP			
TITLE			DELET <b>e</b>	4.1 TITLE			☐ Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREE	ADDRESS			
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP			
TITLE			☐ DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY-S				
TITLE	-		DELETE	6.1 TITLE			☐ Change	Addition
NAME				6.2 NAME	}		-	
STREET ADDRESS				6.3 STREET	AODRESS			
CITY-ST-ZIP				6.4 CiTY - 5				

14. Thereby 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 this seceiver or director of the corporation or the corporation or director of the corporation or director or dire

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PELTY SAINT

3/9/98

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