

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 08, 2001 08:00 AM****Secretary of State****DOCUMENT # 744251****1. Entity Name**
PALERMITI OBSERVATORY, INC.

Principal Place of Business 16222 133RD N. TERRACE DR. JUPITER FL 33478	Mailing Address 16222 133RD N. TERRACE DR. JUPITER FL 33478
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2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1978031	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent TRAWICK & GRIFFIS, P.A. 2051 MAIN STREET SARASOTA FL 33577	7. Name and Address of New Registered Agent <table border="1"><tr><td>Name</td></tr><tr><td>Street Address (P.O. Box Number is Not Acceptable)</td></tr><tr><td>City</td></tr><tr><td>FL Zip Code</td></tr></table>	Name	Street Address (P.O. Box Number is Not Acceptable)	City	FL Zip Code
Name					
Street Address (P.O. Box Number is Not Acceptable)					
City					
FL Zip Code					

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 01/08/2001 DATE	(NOTE: Registered Agent signature required when reinstalling)
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FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael F. Palermiti	PD	01/08/2001
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CR2E037 (11/00)