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 # **F32098**

1. Corporation Name

TOOJAY'S PALM BEACH, INC.

Principal Place	of Business	Mailing Address							
313 AGAYL POIL	NCIANA WAY	3654 GEORGIA AVENUE							
PALM BEACH FL 33480 WEST. PALM BEACH FL									
US	U\$					DO NOT WRITE IN THIS SPACE			
		•				3. Date Incorporated or Qualifed 04/24/1981			
2 Principal Pla	age of Business	2a, Mailing Address				4. FEI Number		Applied Fo	or
1212	ROYAL	26				59-2081908		Not Applic	able
21 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	# ete-		Suite, Apt. #, etc.				\$8.7	5 Additiona	al
22 POIN	iciana way	27	·[5. Certifcate of Status Desired		Required	
City & State	•	City & State				6. Election Campaign Financing		00 May Be	,
23		28				Trust Fund Contribution	Add	led to Fees	
Zip	Country Zip Cou			ry		8. This corporation owes the current year Intangible			
24	25	29 30	30			Personal Property Tax. Yes No			
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
			8	1	Name				
	WN, JAY A.		8:	1	Stroot Addre	ess (P.O. Box Number is Not Acceptable)			\dashv
3654 GEORGIA AVENUE			0.	-	Street Addre	iss (P.O. Box Mulliber is Not Acceptable)			
WEST PALM BEACH FL 33405			8	3				-	
									
**	•		8-		City	FL	_	Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered									
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was autr	iorizea o	у и	ne corporation	n's board of directors. I hereby accept the appo	intment a	is registered	'
agent. i ar	m lamillar with, and accept the obligation	ons of, Section 607.0303, Fiolia	a Statute	,					{
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Ri	egistered Ag	ent :	signature required	when reinstating) DATE			-
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTORS IN	12
TITLE	V	☐ DELETE 1.17					Cha		ddition
NAME	KORENBAUM, WILLIAM D		1.2 NAME						- 1
	3654 GEORGIA AVENUE		1		ADDRESS	,			Ì
STREET ADDRESS	WEST PALM BEACH FL 33405	•	1	1.3 STREET ADDRESS					
CITY-ST-ZIP			_	1.4 CITY-ST-ZIP 2.1 TITLE			[] Cha	nge 🗆 A	ddition
TITLE							_	· –	}
NAME.	BROWN, JAY A		2.2 NAME			•			
STREET ADDRESS	3654 GEORGIA AVENUE		2.3 STREET ADDRES		ADDRESS				Ì
CITY-ST-ZIP ***	WEST PALM BEACH FL		2.4 CITY-S		-ZIP	and the second second second second			ddition
TITLE			3.1 TITLE				☐ Cha	iiye ∐ A	ddition)
NAME	321		3.2 NAME	E	-				
STREET ADDRESS	•		3.3 STRE	ETA	ADDRESS	•			
CITY-ST-ZIP			3.4. CITY	-ST	-ZiP				
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NAME			4. 2 NAM	Ε					-
STREET ADDRESS			4.3 STRE	ET A	ADDRESS				
1	_		4.4 CITY-						
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	5.1 TITLE		-		Cha	nge 🔲 A	ddition
			5.2 NAME				•		
NAME			1		ADDRESS				}
STREET ADDRESS			1						
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TITLE		☐ DELETE						ing∨ ⊟ A	GUIGON
NAME .			6.2 NAME	<u>-</u>					Ì
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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 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 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:

CITY-ST-ZIP

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90047 037 ***150.00