

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F62447 (0)
1. Corporation Name
COMMERCE PARK OF PALM BEACH COUNTY, INC.



Principal Place of Business: **3111 FORTUNE WAY WAREHOUSE B-18 WEST PALM BEACH FL 33402-0018**
Mailing Address: **3111 FORTUNE WAY WAREHOUSE B-18 WEST PALM BEACH FL 33402-0018**

3. Date Incorporated or Qualified: **01/13/1982**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-2148521**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: Yes No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PERTNOY, SIDNEY M
100 SE 2ND STREET, 21ST FLOOR
MIAMI FL 33131**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the date of appointment. *(Signature)* DATE

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE	DP	<input type="checkbox"/> DELETE
NAME	PERTNOY, RONALD	
STREET ADDRESS	3111 FORTUNE WAY, B-18	
CITY - ST - ZIP	W PALM BCH, FL 00000	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	PERTNOY, SIDNEY M	
STREET ADDRESS	330 BISCAYNE BLVD	
CITY - ST - ZIP	MIAMI, FL 00000	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	SHAPIRO, STEVEN	
STREET ADDRESS	12689 HEADWATER CIR	
CITY - ST - ZIP	W PALM BCH, FL 00000	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	WALLACE, MILTON J	
STREET ADDRESS	330 BISCAYNE BLVD	
CITY - ST - ZIP	MIAMI, FL 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add on
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add on
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add on
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add on
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add on
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add on
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) 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.

SIGNATURE:

(Signature) **STEVEN M. SHAPIRO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4029 96
Date

401-7935852
Filing Fee

CR2E034 (12/95)