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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # G11585 1. Corporation Name

**FILED** Feb 10, 1999 8:00am **Secretary of State** 

02-10-1999 90060 011 \*\*\*150.00

PALM B	EACH SAMPLER, INC.	·									
Principal Place	e of Business	Mailing Address				-  + 10673// <b>200</b> /	(400) (100) Divol (	<b>10</b> 1 111 01911	THE FIRM OU	II OLON OSONI II	<b>[</b> ]
C/O DORIS RO		C/O DORIS ROBBINS				1.			Ĩ		
25 B STRATFORD DRIVE		25 B STRATFORD DRIVE									
BOYNTON BEACH FL 33436		BOYNTON BCH FL 33436				DO NOT WRITE IN THIS SPACE					
US		US				3. Date Incorporat	ed or Qualifed				-
		A 44-191- Add				12/03/1982 4. FEI Number					<b></b>  .
<del>-</del>	Place of Business	2a. Mailing Address				1 **			<b>├</b>	Applied For	<u> </u>
21 Suite Ant	# ata	Suite, Apt. #, etc.				22-2845098				Not Applicat Additional	ole .
Suite, Apt. #, etc.		27	<u>⊢</u>				atus Desired		•	Required	
City & Stat	te	City & State				6. Election Campa	ian Financina			0 May Be	
23		28				Trust Fund Con			-	to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation	n owes the cur	rent year In	tangible		
24	25	29	30			Personal Prope		,	☐Yes	□No	
	9. Name and Address of Current	t Registered Agent	.,			10. Name and Add	iress of New	Registered	Agent		
				81	Name						
13.7	s, D. Justin			82	Street Addre	ess (P.O. Box Number	is Not Accept	able)	•		
	1-A W PALMETTO PARK RD				0., 000, 7, 1, 1, 1, 1, 1			<u> </u>	ener wonder		
	TE 305-C			83		1				建钨蜡料	2
BOC	CA RATON FL 33433			84	City		1 (4) \$1(4); - 12 (14) 4(1)	1 (5 40 , 1 °) (1	85 Zi	Code	31
				-	Ony			FL	<b>-</b>   ' '		
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	2 and 607.1508, Florida Statute of Florida. Such change was au	es, the at	oove-r	named corporation	oration submits this standard of directors.	atement for the I hereby acce	purpose o	f changing i intment as	ts registered registered	3
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligat Signature, typed or printed name of registered agent	ions of, Section 607.0505, Flor	ida Statu	ites.		oration submits this stan's board of directors.	atement for the	purpose or pt the appo	f changing i intment as	ts registered registered	6
agent. I a	im familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS AN	t and title if applicable. (NOTE:  D DIRECTORS	ida Statu	ites.				DATE	ND DIRECT	ORS IN 12	(â
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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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR