

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 AM 11:03

DOCUMENT # **G89032** (8)

1. Corporation Name
PALM BUILDERS SPECIALTIES, INC.

Principal Place of Business Mailing Address
6601 LYONS RD. C-9 6601 LYONS RD. C-9
COCONUT CREEK FL 33073 COCONUT CREEK FL 33073

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/06/1984** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-2387844** 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 2a. Mailing Address
21 26
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

BARRY, KATHARINE S., ESQ.
ROTELLA & BOONE
500 E BROWARD BLVD #1460
FT. LAUDERDALE FL 33394-0084

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 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 title (if applicable)

(NOTE: Registered Agent signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1. TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAJOR, HUBERT W. II	12. NAME	Major, Hubert W. II
STREET ADDRESS	3698 COCOPLUM CIRCLE	13. STREET ADDRESS	5851 Holmberg Road, Apt. 2914
CITY, ST, ZIP	COCONUT CREEK FL	14. CITY, ST, ZIP	Parkland, Florida 33073
TITLE	VD	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWEETMAN, JAMES E.	22. NAME	
STREET ADDRESS	4150 SW 102ND AVE	23. STREET ADDRESS	
CITY, ST, ZIP	DAVE FL	24. CITY, ST, ZIP	
TITLE		31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY, ST, ZIP		34. CITY, ST, ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY, ST, ZIP		44. CITY, ST, ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY, ST, ZIP		54. CITY, ST, ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY, ST, ZIP		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 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my agreement 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:

H. W. Major PRESIDENT
ANNUAL FILING AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
H. W. Major

3/28/95 705/421-8572
DATE