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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 16 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J59762

(1)

GOLD PALMS STUDIO, INC.

Principal Place of Business Mailing Address									1 150000 040 0100 1	HIN I jeid tiili fial			
· · · · · · · · · · · · · · · · · · ·													
2410 S. MACDILL AVE. TAMPA FL 33629			2410 S. MACDILL AVE. TAMPA FL 33629-5921										
US	•		US						·				
									 Date Incorporate 03/03/1987 	ed or Qualified		ite of Last R 13/1996	eport
2. Principal Pt	lace of Business	2a. Mailing Address					4. FEI Number			Ar	plied For		
21		:	26					59-2785157				t Applicable	
Suite, Apt.	#, etc.	:	Suite, Apt	t. #, etc.					5. Certificate of Sta	tus Desired		\$8.75 Fee Re	
City & State	e].	City & Sta	ate					Election Campai	- "		\$5.00	
23			Z ID		Country				Trust Fund Cont			Added	
Zip 24	Country	<u> </u>	2.IP 29	_	COUNTRY	y			 This corporation Florida Statutes 			tax under s ∃No	. 199.032,
24]	25 9. Name and Addres				W)			1	io. Name and Add				
DEE	DAVID A., ESQ.				81	T 1	Vame				- -,		
	WEST AZEELE ST				80	<u> </u>	Stront A	ddiasa	/D.O. Bay Number	in Not Assessed			
	E 1400				82	٦	street A	aaress	(P.O. Box Number	is not acceptat	n e)		
	PA FL 33606				83	丁							
	.,,,,				84	1	City				FL	85 Zip	Code
11. Pursuant	to the provisions of Sect	ions 607 0502 ar	nd 607 1508 F	Iorida Statutes	the abov	/e-n	amed o	corpora	tion submits this sta	tement for the c	virnose of	changing i	ts registered
office or r	egistered agent, or both im familiar with, and acce	, in the State of F	lorida Such c	hange was au	thorized b	y th	e corp	oration	s board of directors	I hereby acce	of the app	ointment as	registered
	m tamiliar with, and acce	epi ine omganor	is or, aection t	DUP, COCO, NOR	iga Sialule	·S.							
SIGNATURE	Signal to Typica or print of name	ctregistered agent as	d bile č apolicinble.	(NOTE	Registered Ag	ent s	signature i	equired w	hen reinstaling)		DATE		
12.	O	FFICERS AND D	RECTORS		13.				ADDITIONS/CHA	NGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TITLE	PTD			DELETE	11 TITLE							☐ Change	Addition
NAME	PRIETO, IGNACIÓ A				1.2 NAME								
STREET ADDRESS	2410 S. MACDILL A	VE.			1.3 STREE	TAD	DRESS						
CHY-ST-ZIP	TAMPA FL				1.4 CITY - :	ST-2	?IP						
TITLE	VPS) DELETE	2 1 TITLE							∐ Change	Addition
NAME	PRIETO, BEATRIZ M				2.2 NAME		- 1						
STREET ADDRESS	2410 S. MACDILL A	VE.			2.3 STREE								
CITY-ST-7IP	TAMPA FL			DELETE	2. 4 CHY-	ST-	ZIP					Change	Addition
TOLE			L	JOHELE	3 1 TITLE		ļ			d.			noution
NAME emert apperee					3.2 NAME		ODEC:			,			
STREET ADDRESS					3.3 STREE								
C(TY+ST+ZIP TITLE				DELETE	3.4 CITY- 4.1 TITLE	_	211					Change	Addition
NAME			•		4. 2 NAME								
STREET ADORESS					4.3 STREE		DRESS						
CITY-ST-ZIP					4.4 CITY -								
TITLE				DELETE	5.1 1ITLE							Change	Addition
NAME					5.2 NAME								
STREET ADDRESS					5 3 STREE	T AD	DRESS						
CITY-S1-ZIP			V		5.4 CITY-	ST - 7	ZIP						
TIFLE				DELETE	61 TITLE							☐ Change	Addition
NAME					6.2 NAME								
STREET ADDRESS					6.3 STREE	T AD	DRESS						
CITY-ST-ZIP					6.4 CITY-					. <u> </u>	1	3. 20	
14. I do herei informatio	by certify that the information indicated on this amount of the officer or director of the	ation supplied w tal report or supt	ith this filing do elem <u>ental anne</u>	oes not qualify sal ∢eport is tru	for the exi ie and acc	emp cura	ption st ite and	ated in that my	Section 119.07(3) signature shall hav), Florida Statute /e the same lega	es. I furthe al effect a:	r certify that s if made ur	i the ider oath; that
l am an o	officer or director of the a in Block 12 or Block 13 i	opporation or the	receiver or tre	stee empowe	red to exe ess.	cuti	e this r	eport a	s required by Chapt	er 607, Florida S	Statutes; a	ind that my	name
4,7,70,013	THE PARTY OF THE P	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	and consideration	an add			\sim						