## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K50455

1. Corporation Name
PALM BREEZE PURCHASING CORPORATION

(0)

## **FILED** Mar 16 1998 8:00am Secretary of State



Principal Place of Dushnots   Malling Address   CyC JOSEPH O, MILER   SXX ORANGE AVENUE   FORT PIERCE FL 9947											
SSOO DRANGE AVENUE FORT PIERCE R. 34447  2. Principal Place of Business 2. Applied F. Services 3. Date Incorporated or Crustified 12/10/1/988 2. Principal Place of Business 3. Services 3. Services 3. Date Incorporated or Crustified 12/10/1/988 3. Services 3.	Principal Place	e of Business	Mailing Ad	idress			***		inii Aifin Aibei A	ikii Ainii Aini	
2. Principal Piace of Business 2. Mailing Address 3. Date Inopportunit or Qualified 1. Clify & State 3. Subs. Apt. #, etc. 2. Clify & State 3. Clify & State 4. Clify Clify 5. State Address (P.O. Box Number is Nax Accoptable) 4. Clify Clify 5. State Address (P.O. Box Number is Nax Accoptable) 4. Clify Clify 4. Clify Clify 4. Clify Clify 5. State Address (P.O. Box Number is Nax Accoptable) 4. Clify Clify 6. This component of Clify Clify 6. This component of Clify Clify 6. This component of Clify 6. This com	\$500 ORANGE AVENUE \$500 ORANGE AVENUE							DO NOT WRIT	E IN THIS S	PACE	
Suite, Apt. 6, oic.  Suite, Ap	PONT PIENCE	re oran	TONI FIL	NOC 1C 04047				3. Date Incorporated or Qualified	2 114 11 110 0	702	
Suite. Api #, etc.    Suite.	2. Principal Pl	ace of Business	`	Address						<del></del>	pplied For ot Applicable
City & State    City & State	<b>–</b>	#, etc.	Suite, A	Apt. #, etc.				5. Certificate of Status Desired		,	
2p   2p   2p   2p   30   Personal Property Tax due June 30   Per	City & State	3	City &	State		•				\$5.00	May Be
25   29   30   Personal Property Tax due June 30   Prés   No	<del></del>	Country			Cou	intry					
B. Name and Address of Current Registered Agent MILLER, JOSEPH G.  5500 ORANGE AVENUE FORT PIERCE FL  82  Street Address (P.O. Box Number is Not Acceptable)  83  Street Address (P.O. Box Number is Not Acceptable)  84  City FL  85  City FL  86  City FL  87  City FL  87  City FL  88  City FL  Change Ad  C	a	η · ·	<u>├</u>		30	•					
SSOO DRANCE AVENUE FORT PIERCE FL  88  B4 City FL 95 Zip Code  11. Pursuant 10 the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its replate office or registered agent, or both, in the State of Florida. Such change was authorized by the corporations aboard of directors. I hereby accept the appointment as register agent. I am familier with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS N 12  12. TITLE  12. OFFICE RS AND DIRECTORS 12. NAME  SIREST ADDRESS 13. TITLE  12. NAME 13. SIREST ADDRESS 14. CITY-ST-ZIP 10. Change 14. TITLE 10. Change 14. Change 15. TITLE 16. Change 16. STREET ADDRESS 16. CHY-ST-ZIP 17. TITLE				gent	[50]			10. Name and Address of New R	egistered A	gent	
### Stood ORANGE AVENUE FORT PIERCE FL  ### Street Address (P.O. Box Number is Not Acceptable)  ### City  ### City #	MIL		<del>-</del> •¹			B1	Name				
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 register agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  TITLE  OFFICERS AND DIRECTORS  TITLE  NAME  STREET ADDRESS  CITY-S1-2P  TITLE  ORAGE AVENUE  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY-S1-2P  TITLE  ORLETE  JELETE	550	O ORANGE AVENUE				82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)		
11. Pursuant of the provisions of Sections 607.0502 and 607.1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 register agent is an termilar with, and accept the obligations of, Section 607.0505, Floridal Statutes.  SIGNATURE  Signature, typical or princed name of registering of the princed name of registerin	rọi,	HI FIERUE FL				83			<del></del>		
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 register agent and the membrane with an except the obligations of yearching in the y						84	City	·	FL	<b>85</b> Zip	Code
Signature, speed or printed name of regolatered agent and site of suphrace And DIRECTORS (NOTE Registered Agent leginalure recolard when inheritary) DATE  OFFICERS AND DIRECTORS N 12  TITLE  MILLER, JOSEPH G.  \$500 ORANGE AVENUE FORT PIERCE FL  1.2 PIMME  \$500 ORANGE AVENUE FORT PIERCE FL  1.3 STREET ADDRESS  \$500 ORANGE AVENUE FORT PIERCE FL  1.4 CITYST-ZIP  TITLE  DELETE  2.1 TITLE  DELETE  2.1 TITLE  DELETE  2.1 TITLE  DELETE  3.1 TITLE  DELETE  4.1 TITLE  DELETE  4.1 TITLE  DELETE  5.1 TITLE  DEL	office or re	egistered agent, or both, in the Sta	te of Florida. Such	i chan <b>ge wa</b> s a	authorize	d by	the corporat	oration submits this statement for the ion's board of directors. I hereby acce	purpose of opt the appo	changing it intment as	ts registered registered
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MILLER, JOSEPH G.  \$TREET ADDRESS \$500 ORANGE AVENUE FORT PIERCE FL    DELETE   1.4 CITY-ST-2IP     DELETE   2.1 TITLE   2.2 NAME     2.2 NAME   2.2 STREET ADDRESS	12.	OFFICERS A	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	RS IN 12
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.ettkst-zip 6.4 City-st-zip							ADDRESS				
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14.) I hereby certify that the information supplied with this filing does not qualify for the exemption stand 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 a	14.) hereby o	ertify that the information supplied	with this filing doe	es not qualify for				Section 119.07(3)(i), Florida Statutes.	I further cer	ify that the	information

officer or director of the corporation or the receiver or trustee empowered to execute this report as equired 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.

ATUBEL (V)