


FILED

Jan 21 1997 8:00am  
Secretary of State

<p style="text-align: center;"><b>PROFIT CORPORATION ANNUAL REPORT 1997</b></p>		<p style="text-align: center;">FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS</p>
<p><b>DOCUMENT # L17083 (1)</b></p>		
<p><b>1. Corporation Name</b> <b>PALM BREEZE CORPORATION</b></p>		
<p><b>Principal Place of Business</b> <b>1587 CARRINGTON AVE. WINTER SPRINGS FL 32708</b></p>		<p><b>Mailing Address</b> <b>1587 CARRINGTON AVE. WINTER SPRINGS FL 32708-6131</b></p>
<p><b>2. Principal Place of Business</b></p> <p><b>21</b> Suite, Apt. #, etc.</p> <p><b>22</b> City &amp; State</p> <p><b>23</b> Zip</p> <p><b>24</b> Country</p>		<p><b>2a. Mailing Address</b></p> <p><b>26</b> Suite, Apt. #, etc.</p> <p><b>27</b> City &amp; State</p> <p><b>28</b> Zip</p> <p><b>29</b> Country</p>
<p><b>9. Name and Address of Current Registered Agent</b></p> <p><b>DULIN, RAMSEY W. 201 EAST PINE STREET, SUITE 1402 ORLANDO FL 32801</b></p>		
		<p><b>81</b> Name</p> <p><b>82</b> Street Address</p> <p><b>83</b></p> <p><b>84</b> City</p>
<p><b>11.</b> Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporate agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.</p>		
<p><b>SIGNATURE</b></p> <p style="text-align: right;">(NOTE: Registered Agent signature required)</p>		
<p><b>12. OFFICERS AND DIRECTORS</b></p>		
<p><b>TITLE</b></p> <p><b>NAME</b></p> <p><b>STREET ADDRESS</b></p> <p><b>CITY - ST - ZIP</b></p>	<p><b>CEO</b> <input type="checkbox"/> DELETE</p> <p><b>BRAND, MARVIN</b></p> <p><b>1587 CARRINGTON AVE</b></p> <p><b>WINTER SPRINGS FL</b></p>	<p><b>13.</b></p> <p><b>1.1 TITLE</b></p> <p><b>1.2 NAME</b></p> <p><b>1.3 STREET ADDRESS</b></p> <p><b>1.4 CITY - ST - ZIP</b></p>
<p><b>TITLE</b></p> <p><b>NAME</b></p> <p><b>STREET ADDRESS</b></p> <p><b>CITY - ST - ZIP</b></p>	<p><b>PST</b> <input type="checkbox"/> DELETE</p> <p><b>BRAND, ARLENE</b></p> <p><b>1587 CARRINGTON AVE</b></p> <p><b>WINTER SPRINGS FL</b></p>	<p><b>2.1 TITLE</b></p> <p><b>2.2 NAME</b></p> <p><b>2.3 STREET ADDRESS</b></p> <p><b>2.4 CITY - ST - ZIP</b></p>
<p><b>TITLE</b></p> <p><b>NAME</b></p> <p><b>STREET ADDRESS</b></p> <p><b>CITY - ST - ZIP</b></p>	<p><input type="checkbox"/> DELETE</p>	<p><b>3.1 TITLE</b></p> <p><b>3.2 NAME</b></p> <p><b>3.3 STREET ADDRESS</b></p> <p><b>3.4 CITY - ST - ZIP</b></p>
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<p><b>TITLE</b></p> <p><b>NAME</b></p> <p><b>STREET ADDRESS</b></p> <p><b>CITY - ST - ZIP</b></p>	<p><input type="checkbox"/> DELETE</p>	<p><b>5.1 TITLE</b></p> <p><b>5.2 NAME</b></p> <p><b>5.3 STREET ADDRESS</b></p> <p><b>5.4 CITY - ST - ZIP</b></p>
<p><b>TITLE</b></p> <p><b>NAME</b></p> <p><b>STREET ADDRESS</b></p> <p><b>CITY - ST - ZIP</b></p>	<p><input type="checkbox"/> DELETE</p>	<p><b>6.1 TITLE</b></p> <p><b>6.2 NAME</b></p> <p><b>6.3 STREET ADDRESS</b></p> <p><b>6.4 CITY - ST - ZIP</b></p>
<p><b>14.</b> I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or on an attachment with my address.</p>		
<p><b>SIGNATURE:</b></p> <p style="text-align: center;"><i>Marvin Brand</i></p> <p style="text-align: center;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</p>		



CR2E034 (9/96)