

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # M29824 (3)

1. Corporation Name

PALMETTO PROPERTY MANAGEMENT, INC.

Principal Place of Business

Mailing Address

8036 S.W. 152ND STREET  
MIAMI FL 33157  
US

9036 S.W. 152ND STREET  
MIAMI FL 33157  
US



3. Date Incorporated or Qualified

04/02/1986

3a. Date of Last Report

06/14/1995

2. Principal Place of Business

2a. Mailing Address

21 23140 S.W. 187TH AVE.  
Suite, Apt. #, etc

26 23140 S.W. 187TH AVE.  
Suite, Apt. #, etc

4. FEI Number

59-2657146

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

22 City & State  
23 MIAMI, FLORIDA

27 City & State  
28 MIAMI, FLORIDA

24 Zip  
33170

25 Country  
DADE

29 Zip  
33170

30 Country  
DADE

9. Name and Address of Current Registered Agent

JOHNSON, CHERYL A.  
9036 S.W. 152ND STREET  
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name  
JOHNSON, CHERYL A.

82 Street Address (P.O. Box Number is Not Acceptable)  
23140 S.W. 187TH AVE.

83

84 City  
MIAMI, FLORIDA

FL

85 Zip Code

33170

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

*Cheryl A. Johnson*

7/8/96

(NOTE: Registered Agent signature required when making change)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DP  
JOHNSON, CHERYL A.  
9036 S.W. 152ND STREET  
MIAMI FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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CITY - ST - ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP  
DP  
JOHNSON, CHERYL A.  
23140 S.W. 187TH AVE.  
MIAMI, FLORIDA 33170

☒

Change

☐

Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

☐

Change

☐

Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

☐

Change

☐

Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

☐

Change

☐

Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

☐

Change

☐

Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

☐

Change

☐

Addition

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 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Cheryl A. Johnson*

CHERYL A. JOHNSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Doc

04/20/96

CR2E034 (3/96)