

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 25 AM 10:41

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # M96131

(1)

1. Corporation Name

PALON BUILDERS, INC.

Principal Place of Business

**780 N.W. 35TH STREET
OAKLAND PARK FL 33309-5003**

Mailing Address

**780 N.W. 35TH STREET
OAKLAND PARK FL 33309-5003**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/25/1988

3a. Date of Last Report

04/28/1994

4. FBI Number

65-0070873

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

**PALON BUILDER'S, INC.
11401-A W. Palmetto Pk. Rd.
Suite #238
Boca Raton, FL 33428-2409**

**PALON BUILDER'S, INC.
11401-A W. Palmetto Pk. Rd.
Suite #238
Boca Raton, FL 33428-2409**

24

25

29

30

9. Name and Address of Current Registered Agent

**PALONKA, MICHAEL J.
780 N.W. 35TH ST.
OAKLAND PARK FL 33309**

10. Name and Address of New Registered Agent

81. Name

PALONKA, MICHAEL J.

82. Street Address (P.O. Box Number is Not Acceptable)

11394 COUNTRY SOUND CT.

83.

BOCA RATON, FL., 33428-2409

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

Michael J. Palonka **MICHAEL J. PALONKA**

4-18-95

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PSD

NAME

PALONKA, MICHAEL J.

STREET ADDRESS

780 N.W. 35TH ST.

CITY - ST - ZIP

OAKLAND PARK FL

1.1 TITLE

PSD

1.2 NAME

PALONKA, MICHAEL J.

1.3 STREET ADDRESS

11394 COUNTRY SOUND CT.

1.4 CITY - ST - ZIP

BOCA RATON, FL. 33428-2409

☒ Change ☐ Addition

TITLE

VD

NAME

PALONKA, KEVIN

STREET ADDRESS

780 N.W. 35TH ST.

CITY - ST - ZIP

OAKLAND PARK FL

2.1 TITLE

VD

2.2 NAME

PALONKA, KEVIN

2.3 STREET ADDRESS

11394 COUNTRY SOUND CT.

2.4 CITY - ST - ZIP

BOCA RATON, FL. 33428-2409

☒ Change ☐ Addition

TITLE

TD

NAME

PALONKA, RYAN

STREET ADDRESS

780 N.W. 35TH ST.

CITY - ST - ZIP

OAKLAND PARK FL

3.1 TITLE

TD

3.2 NAME

PALONKA, RYAN

3.3 STREET ADDRESS

11394 COUNTRY SOUND CT.

3.4 CITY - ST - ZIP

BOCA RATON, FL. 33428-2409

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael J. Palonka **MICHAEL J. PALONKA**

407-883-9972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-95

DATE