FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 04, 2004 8:00 am
Secretary of State
06-04-2004 90005 011 ***150.00

DOCUMENT # P01000000512

1. Entity Name
PALM BEACH PROPERTIES, INC

DO NOT WRITE IN THIS SPACE

54056840

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3600 BROADWAY AVE	3600 BROADWAY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WEST PALM BEACH, FL	City & State: WEST PALM BEACH, FL
Zip: 33407 Country: USA	Zip: 33407 Country: USA

4. FEI Number: 65-1128398 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: KEITH MILLER

Street Address (P.O. Box Number is Not Acceptable): 749 WHIPPOORWILL BVD

City: WEST PALM BEACH FL Zip Code: 33411

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
(Signature of new registered agent, if applicable) (NOTE: Registered Agent signature required when name changed)

January 1 - May 1 Fee Is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MILLER, KEITH ~~749 WHIPPOORWILL BLVD~~ ~~WEST PALM BEACH, FL 3344~~
TITLE NAME STREET ADDRESS CITY-ST-ZIP	626 30TH ST. WEST PALM BEACH, FL 33407
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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment 54056840

JAMES J. DONOVAN, C.P.A. P.A.
3830 JOG ROAD
LAKE WORTH, FL 33467
PHONE: (561) 641-9550 FAX: (561) 641-4781

MAY 21, 2004

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

RE: PALM BEACH PROPERTIES, INC.
DOCUMENT #P01000000512

DEAR SIR/MADAM:

PLEASE BE ADVISED OF THE FOLLOWING FACTS AND CIRCUMSTANCES REGARDING THE LATE FILING OF THIS RETURN.

1). THE TAXPAYER DID NOT RECEIVE THE ANNUAL REPORT AND HAD NO KNOWLEDGE THAT AN ANNUAL REPORT WAS REQUIRED.
2). THEREFORE, WE BELIEVE REASONABLE CAUSE EXISTS FOR YOU WAIVING THE ASSESSED PENALTY.
3). WE HAVE ENCLOSED A CHECK IN THE AMOUNT OF $150.00 FOR 2004.
4). IF YOU HAVE ANY QUESTIONS ON THE ABOVE, PLEASE FEEL FREE TO CONTACT OUR OFFICE.

THANK YOU FOR YOUR COOPERATION,

SINCERELY,

JAMES DONOVAN, CPA KEITH MILLER

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS STATEMENT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT, AND COMPLETE.