

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030761

FILED  
Mar 03, 2004  
Secretary of State

Entity Name: PALACE'S CORPORATION

## Current Principal Place of Business:

6975 SW 24 ST.  
MIAMI, FL 33155

## New Principal Place of Business:

## Current Mailing Address:

1927 SW 107 AV.  
APT. # 305  
MIAMI, FL 33165

## New Mailing Address:

890 SW 129TH PLACE  
APT. # 104  
MIAMI, FL 33184

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALACIOS, TEODORO M  
1927 SW 107 AVE APT 305  
MIAMI, FL 33165

## Name and Address of New Registered Agent:

PALACIOS, EDSON J  
1927 SW 107 AVE APT 305  
MIAMI, FL 33165

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.

SIGNATURE: EDSON J. PALACIOS

03/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PALACIOS, TEODORO M  
Address: 1927 SW 107 AVE APT 305  
City-St-Zip: MIAMI, FL 33165

Title: VD ( ) Delete  
Name: PALACIOS, MARIA J  
Address: 1927 SW 107 AVE APT 305  
City-St-Zip: MIAMI, FL 33165

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LAFUENTE, ANABELL N  
Address: 890 SW 129TH PLACE #104  
City-St-Zip: MIAMI, FL 33184

Title: VD (X) Change ( ) Addition  
Name: PALACIOS, EDSON J  
Address: 1927 SW 107 AVE APT 305  
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANABELL N LAFUENTE

PD

03/03/2004

Electronic Signature of Signing Officer or Director

Date