

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030761

FILED
May 24, 2005
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:

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

New Mailing Address:

18207 SW 154TH CT
MIAMI, FL 33187

FEI Number: 65-1086893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAFUENTE, ANABELL N
Address: 18207 SW 154TH CT
City-St-Zip: MIAMI, FL 33187

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: PALACIOS, MARIA J
Address: 890 SW 129TH PLACE #104
City-St-Zip: MIAMI, FL 33184

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

05/24/2005

Electronic Signature of Signing Officer or Director

Date