2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

FILED Feb_{Flederived} 08:00 AM Secretary of State DOCUMENT # P01000041101 1. Entity Name PALACE GRAND, INC. FEB 2 2 2005 Hernando County Property Appraiser Principal Place of Business Mailing Address 275 DELLA COURT 275 DELLA COURT SPRING HILL, FL 34609 SPRING HILL, FL 34609 2. Principal Place of Business 3. Mailing Address Suite, Apt. if, etc. Suite, Apt. #, etc. 02122005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3712374 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SESSA, SALVATORE Street Address (P.O. Box Number is Not Acceptable) 275 DELLA COURT SPRING HILL, FL 34609 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10, OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP ☐ Delete TITLE TITLE ☐ Change ☐ Addition SESSA, SALVATORE NAME MAME U00000242281 02/24/05-80081-008 150.00 STREET ADDRESS 5393 LEATHER SADDLE LANE STREET ADDRESS CITY-ST-71P SPRING HILL, FL 34609 CITY-ST-ZiP DVST TITLE Delete TITLE ☐ Change ☐ Addition SESSA, NICHOLAS NAME MAME STREET ADDRESS 7345 DOGWOOD CRESCENT STREET ADDRESS SPRING HILL, FL 34607 CITY- ST-ZIP City-ST-2IP ☐ Dalete ☐ Change Addition TITLE THILE GRESSACK, DANIEL NAME NAME STREET ADDRESS 8 APPLE MANOR LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EAST BRUNSWICK, NJ 08816 mr. D3V Delete ☐ Change ☐ Addition GRESSACK, MARK NAME NAME STREET ADDRESS 8 APPLE MANOR LANE STREET ADDRESS EAST BRUNSWICK, NJ 08816 CITY- ST-ZIP CITY ST 71P ☐ Change □ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CMY-ST-ZIP ☐ Delete TITE 6 ☐ Change Addition 🔲 TITLE NAME NAME STREET ADDRESS STREET ADDRESS CMY-ST-ZIP CITY-ST-7IP 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SALVATORE SESSA

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR