2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000059020

Entity Name: PALM 67, INC.

FILED Apr 11, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1428 BRICKELL AVENUE SUITE 105 4400 BISCAYNE BLVD., SUITE 950

MIAMI, FL 33137 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

1428 BRICKELL AVENUE SUITE 105 4400 BISCAYNE BLVD., SUITE 950

MIAMI, FL 33131 MIAMI, FL 33137 UŚ

FEI Number: 65-1122983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

M & W AGENTS, INC 2101 CORPORATE BLVD SUITE 107 BOCA RATON, FL 33431

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

MIAMI, FL 33131

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MIAMI, FL 33137 US

Title: () Delete Title: (X) Change () Addition

HALPRYN, GLENN L HALPRYN, GLENN L Name: Name:

1428 BRICKELL AVENUE SUITE 105 4400 BISCAYNE BLVD., SUITE 950 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33137 US

Title: VST Title: VST () Delete (X) Change () Addition

HOERNER, JUDITH A Name: Name: HOERNER, JUDITH A

1428 BRICKELL AVENUE SUITE 105 4400 BISCAYNE BLVD., SUITE 950 Address: Address:

MIAMI, FL 33131 MIAMI, FL 33137 US City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition HALPRYN, ERNEST M HALPRYN, ERNEST M Name: Name:

1428 BRICKELL AVENUE SUITE 105 4400 BISCAYNE BLVD., SUITE 950 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33137 US

Title: () Delete Title: (X) Change () Addition CABRERA, MARLENE CABRERA, MARLENE Name: Name:

Address: 1428 BRICKELL AVE #105 Address: 4400 BISCAYNE BLVD., SUITE 950 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119 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: GLENN L. HALPRYN PD 04/11/2007