

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 28, 2002 8:00 am**  
**Secretary of State**

08-28-2002 90036 029 \*\*\*150.00

DOCUMENT # **PD1000099568**

1. Entity Name

**Palma Development Corporation**

**DO NOT WRITE IN THIS SPACE**

**976922**

2. Principal Place of Business

**9200 S.W. 80 TERR.**

3. Mailing Address

**SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**MIAMI, FLORIDA**

City & State

4. FEI Number

**65-1147986**

Applied For

Not Applicable

Zip

**33173**

Country

**MIAMI - DADE**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**FELIX A. ROSABAL**

Street Address (P.O. Box Number is Not Acceptable)

**9200 SW 80 TERRACE**

**MIAMI, FL**

**33173**

City

**FL**

Zip Code

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

(See criteria on back)

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Department of State**

10. Election Campaign Financing

Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ROSABAL, FELIX ANTONIO  
9200 S.W. 80 TERRACE  
MIAMI, FL 33173**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
DE PEREA, CARMEN BORJA  
9225 SW 82 AVE  
MIAMI, FL 33158**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FELIX A. ROSABAL**

**8-22-02**

Date

Daytime Phone #

**305-596-0699**

CR2E034B (12/01)



*Attachment  
976922*

FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

August 8, 2002

PALMA DEVELOPMENT CORPORATION  
9200 SW 80 ST  
MIAMI, FL 33173

SUBJECT: PALMA DEVELOPMENT CORPORATION  
Ref. Number: P01000099568

Upon receipt of your letter and/or check(s) totaling \$150.00, no document was found. Please send your document with any fees due to:

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Please attach letter requesting fee abatement.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott  
Document Specialist

Letter Number: 902A00047374

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Document Specialist

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