

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 28, 2004 8:00 am
Secretary of State

07-28-2004 90023 016 ***150.00

DOCUMENT # P02000095563

1. Entity Name

PALM BEACH CHARTERS, CORP.



Principal Place of Business

501 BROWARD AVENUE
GREENACRES FL 33463

Mailing Address

501 BROWARD AVENUE
GREENACRES FL 33463

44050285



MOORE

CR2E034 (4/04)

2. Principal Place of Business

901 W 15th ST

Suite, Apt. #, etc.

3. Mailing Address

901 W 15th ST

Suite, Apt. #, etc.

City & State

Riviera Beach FL

City & State

Riviera Beach, FL

Zip
33404

Country

Zip
33404

Country

4. FEI Number

03-0108300

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

- PONDER, SHARON -
501 BROWARD AVENUE
GREENACRES FL 33463

7. Name and Address of New Registered Agent

Name

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

901 W 15th ST

City RIVIERA BEACH

FL

Zip Code

33404

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

Sharon Ponder SHARON PONDER

7-26-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME PONDER, SHARON
STREET ADDRESS 501 BROWARD AVENUE
CITY-ST-ZIP GREENACRES FL 33463

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Change ☐ Addition
NAME SHARON PONDER
STREET ADDRESS 901 W 15th ST
CITY-ST-ZIP Riviera Beach, FL 33404

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE: Sharon Ponder Sharon Ponder 7/26/04 5614392223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #