

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000009933

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: PALMS OF LIFE, INC.

**Current Principal Place of Business:**

600 NE 25TH ST  
SUITE 74  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

600 NE 25TH ST  
SUITE 74  
MIAMI, FL 33137

**New Mailing Address:**

700 EUCLID AVENUE  
SUITE 208  
MIAMI, FL 33139

FEI Number: 01-0804722

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GNANAKKAN, JACOB  
600 NE 25 ST  
SUITE 74  
MIAMI, FL 33137 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: GNANAKKAN, JACOB D  
Address: 600 NE 25TH ST STE 74  
City-St-Zip: MIAMI, FL 33137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JACOB D. GNANAKKAN

PSTD

01/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date