

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053377

FILED
Apr 21, 2005
Secretary of State

Entity Name: PROJECT PALM BEACH INC.

Current Principal Place of Business:

10232 AVENIDA DEL RIO
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

10232 AVENIDA DEL RIO
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 20-0930711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

CASPER, MELANIE L
3790 SAINT JAMES WAY
BOCA RATON, FL 33434 US

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: MELANIE L. CASPER

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAJEWSKI, CHRISTOPHER
Address: 10232 AVENIDA DEL RIO
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: MAJEWSKI, MARCIE
Address: 10232 AVENIDA DEL RIO
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: CASPER, ROBERT
Address: 10232 AVENIDA DEL RIO
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: GREEN, JANICE
Address: 10232 AVENIDA DEL RIO
City-St-Zip: DELRAY BEACH, FL 33446

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: CASPER, MELANIE
Address: 10232 AVENIDA DEL RIO
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MELANIE L. CASPER

D

04/21/2005

Electronic Signature of Signing Officer or Director

Date