

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P22987 (2)

1. Corporation Name

PALM KEY CORP.



Principal Place of Business

Mailing Address

%DIVERSIFIED CORPORATE SERVICES INT'L. INC  
261 MADISON AVE., 21ST FLOOR  
NEW YORK NY 10016

%DIVERSIFIED CORPORATE SERVICES INT'L. INC  
261 MADISON AVE., 21ST FLOOR  
NEW YORK NY 10016

3. Date Incorporated or Qualified  
02/14/1989

3a. Date of Last Report  
04/04/1995

2. Principal Place of Business

2a. Mailing Address

21 275 MADISON AVE

26 275 MADISON AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 30TH FLOOR

27 30TH FLOOR

City & State

City & State

23 NY, NY

28 NY, NY

Zip

Country

Zip

Country

24 10016

25 USA

29 10016

30 USA

4. FEI Number

22-2950268

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIVERSIFIED CORPORATE SERVICES INT'L, INC.  
7120 N.W. 44TH COURT  
LAUDERHILL FL 33319

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's name registered elsewhere)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME FORGASH, JACK  
STREET ADDRESS 261 MADISON AVE 21ST FL  
CITY-ST-ZIP NEW YORK NY

TITLE AS ☐ DELETE

NAME LEVINSON, HARRY  
STREET ADDRESS 10 EAST 40TH STREET  
CITY-ST-ZIP NEW YORK NY

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

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P  
FORGASH, JACK  
275 MADISON AVE 30TH FLR  
NY, NY

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*John Forcash*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-96

(212) 490-0050

CR2E034 (12/95)