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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name P40675 (1)

D41.44	DOMED	CORPORATION
РΜМ	PIMPR	CORPURATION

PALM P	UWER CURPORATION										
Principal Place of	Business	Ma	iling Address				, , , , , , , , , , , , , , , , , , , ,				
50 BEALE ST			50 BEALE ST								
SAN FRANCISC	CO CA 94105		C/O TAX DEP SAN FRANCISCO CA	04106				T. 5	-tflt fla		
US			US				3. Date Incorporated or Qualified	3a. U	Date of Last Report 04/27/1995		
							09/28/1992 4. FEI Number	_L		Applied For	
2. Principal Place	e of Business		Mailing Address				94-3115336			Not Applicable	
21		26	Suite. Apt. #, etc.					_ _		Additional	
Suite, Apt. #,	etc.	27	Suite, Apr. #, etc.				5. Cert ficate of Status Desired			Required	
City & State		- -	City & State				6. Election Campaign Financing	<u></u>	\$5.00	May Be	
23		28	•				Trust Fund Contribution			to Fees	
Zip	Country		Zφ	Çou	intry		8. This corporation has liability for	intangible	e tax under s	199.032,	
24	25	29		30	r <i>-</i>		Florida Statutes Yes 10. Name and Address of New I	No			
	9. Name and Address of Currer	t Regis	tered Agent		01	Name	10. Name and Address of New I	register	eu Agont		
					01						
C T COR	PORATION SYSTEM				82	Street A	Address (P.O. Box Number is Not Accepta	ole)	4.		
	UTH PINE ISLAND ROAD				83						
PLANTA1	NON FL 33324								Terl 7	p Code	
					84	City		F	= i _ 85 Zg	J C006	
	egnature, typical or ported name of registeres algo-			r. R. gotero ■ 13.	п А,⊩н	it signature re	ADDITIONS/CHANGES TO OF	FICERS /		DRS IN 12	
12.		ALL ENERGY	DELETE		iii (E				☐ Change	☐ Addition	
TITLE NAME	PD Carter, J. D.		<u></u>	121	AME						
STREET ADDRESS	50 BEALE STREET			135	STREE	ADDRESS					
CITY-SI-ZIP	SAN FRANCISCO CA			140	DITY :	\$1 - 71 ⁶			X	Addition	
TITLE	EVD		☐ DELETE	2 1	TITLE				Change Change	☐ Addition	
NAME	LAPA, JUDE P				NAME		CAIN, F. J.				
STREET ADDRESS	50 BEALS ST.						50 BEALE STREET	۸۴			
CITY -ST - ZIP	SAN FRANCISCO CA		Files			S1-71 ²	SAN FRANCISCO, CA 941	<u>U</u>	Change	Addition	
TITLE	\$		DELETÉ		THILE NAMe						
NAME	ZIEROTH, GARY A					ET ADDRESS					
STREET ADDRESS	50 BEALE ST.					ST-ZIP					
CITY-ST-ZIP	SAN FRANCICO CA		DELETE		TITLE		SR V PRESIDENT/TREASU	RER	K) Change	Addition	
TITLE NAME	VTC UNRUH. V. P.			42	NAME		UNRUH, V. P.				
STREET ADORESS	50 BEALE STREET			4.3	STREE	T ADDRESS					
CITY-ST-ZIP	SAN FRANCISCO CA			4.4	CITY	ST-ZIP	SAN FRANCISCO, CA 941			FTT Addition	
TIPLE	D		DELETE	5 1	TITLE		V PRES/CONTR/ASST TRE	lAS	Change	: Addition	
NAME	HULL, C. W.			5.2	NAME		PROCTOR, G. C.				
STREET ADDRESS	50 BEALE STREET					FT ADDRESS	30 Diminip Danie -				
CITY - ST - ZIP	SAN FRANCISCO CA		E SSICTS			ST-ZIP	SAN FRANCISCO, CA 941	.05	K Change	Addition	
TITLE	D		☐ DELETE		1 71111	_	ASST CONTROLLER		4 4 da		
NAME	WEISER, J. W.			6.2	NAM	E EZ ADBOLGO	MARTELLO, M. E. 50 BEALE STREET				
STREET ADDRESS	50 BEALE STREET					- ST-ZIP	SAN FRANCISCO, CA 94:	105			
CITY - ST - ZIP	SAN FRANCISCO CA			b 4	FLIT	rot-zir	ralify the execution stated in Section 1	19.07(3)(k), Florida Stat	tutes. I further	

SAPHANCISCO CA

14. Too hereby certify that the information supplied with this filing is voluntarily furnished and dues not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information supplied with this filing is voluntarily furnished and dues 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 undercentry 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 apaddress.

SIGNATURE:

M.E. MARTELLO

Assignation for 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 apaddress.

SIGNATURE:

M.E. MARTELLO

Assignation for 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 apaddress.

Departed Florida

Departed Officer

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