FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 JUL 17 PM 3:28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000062489 (8)

1. Corporate Name

MISTY PALMS CORPORATION

Principal Place of Business

391 SOUTHEAST 19TH AVENUE
POMPANO BEACH FL 33060

Mailing Address

POST OFFICE BOX [redacted] 50591
[redacted]
LIGHTHOUSE PT. FA. 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/02/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0433048 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21) / Suite, Apt. #, etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Suite, Apt. #, etc. (27) / City & State (28) / Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

COLLINS, JOHN C
~~11460 CHANDLER DRIVE~~
~~COOPER CITY FL 33026~~
391 S E 19TH AVE APT#10
POMPANO BEACH, FL 33060

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

Title	D
Name	COLLINS, JOHN C — N/A
Street Address	~~11460 CHANDLER DRIVE~~ PO BOX 50591
City-St-Zip	~~COOPER CITY FL 33026~~ LIGHTHOUSE PT. FL 33064
Title	D
Name	COLLINS, GENE — N/A
Street Address	~~11460 CHANDLER DRIVE~~ PO BOX 50591
City-St-Zip	~~COOPER CITY FL 33026~~ LIGHTHOUSE PT, FL 33064
Title	D
Name	COLLINS, JACQUELINE
Street Address	1239 SOUTHEAST 14TH AVENUE
City-St-Zip	DEERFIELD BEACH FL 33441

TLS 7/17/95

$Deposited by Bank

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

391 S.E. 19th Ave Apt #10
Pompano Beach, Fl. 33060

391 S.E. 19th Ave Apt #10
Pompano Beach, Fl. 33060

REMITTED BY MAY 1

14. I the undersigned certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(i), 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: Gene Collins GENE COLLINS 4/1/95 (305) 783-2080

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0426541 FP