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FILED

May 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000068140 (1)

1. Corporation Name  
PALM PRODUCTS INC.

Principal Place of Business

809 2ND AVENUE S.  
LAKE WORTH FL 33460  
US

Mailing Address

P.O. BOX 15  
BOYNTON BEACH FL 33425-0015  
US



3. Date Incorporated or Qualified 09/30/1993  
3a. Date of Last Report 08/08/1996

4. FEI Number 65-0439166  
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

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES INC.  
4521 PGA BLVD  
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name Michael Donegan  
82 Street Address (P.O. Box Number is Not Acceptable) 609 2nd Ave S.  
83  
84 City Lake Worth FL 85 Zip Code 33460

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 signature required when constituting)

DATE

Michael Donegan Treasurer

4/20/97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME COX, ALAN  
STREET ADDRESS 4744 POSEIDON PL  
CITY-ST-ZIP LAKE WORTH FL

TITLE D ☐ DELETE

NAME STOCKHAMMER, STANLEY  
STREET ADDRESS 4744 POSEIDON PL  
CITY-ST-ZIP LAKE WORTH FL

TITLE D ☐ DELETE

NAME DONEGAN, MICHAEL  
STREET ADDRESS 4744 POSEIDON PL  
CITY-ST-ZIP LAKE WORTH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Alan Cox  
1.3 STREET ADDRESS 609 2nd Ave S.  
1.4 CITY-ST-ZIP Lake Worth, FL 33460

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Stanley Stockhammer  
2.3 STREET ADDRESS 609 2nd Ave S.  
2.4 CITY-ST-ZIP Lake Worth, FL 33460

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME Michael Donegan  
3.3 STREET ADDRESS 609 2nd Ave S.  
3.4 CITY-ST-ZIP Lake Worth, FL 33460

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(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 or is changed, or on an attachment with an address.

SIGNATURE

Michael Donegan

4/19/97

609 2nd Ave S.

CR2E034 (9/96)