

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED

97 AUG 28 AM 8:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000037401 (4)

1. Corporation Name  
PALERMO, INC.

Principal Place of Business  
4403A EL MAR DRIVE  
LAUDERDALE BY THE SEA FL 33308

Mailing Address  
4403A EL MAR DRIVE  
LAUDERDALE BY THE SEA FL 33308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/18/1994	3a. Date of Last Report 07/25/1996
4. FEI Number 65-0492038	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

9. Name and Address of Current Registered Agent

KAHN, MITCHELL  
19304 GLENMORE DRIVE  
WEST PALM BEACH FL 33409

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

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 office, if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME FRANK NATALE  
STREET ADDRESS 4553 BOUGAINVILLE DR #7  
CITY-ST-ZIP LAUDERDALE FL

TITLE VP ☐ DELETE

NAME KAHN, MITCHELL  
STREET ADDRESS 19304 GLENMORE DR  
CITY-ST-ZIP WEST PALM BEACH 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

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

600002283038-6

09/02/97-01158-010

\*\*\*\*170.00 \*\*\*\*170.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 supplementary 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.

CR2E034 (4/97)

②

**Thomas F. Walsh**

**Certified Public Accountant**  
1133 S. University Drive, Suite 201  
Plantation, FL 33324

**Phone: (954) 476-1072**  
**FAX: (954) 423-8487**

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Member: Florida Institute of Certified Public Accountants

August 18, 1997

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sirs,

My clients recently received the enclosed corporation annual renewal form.

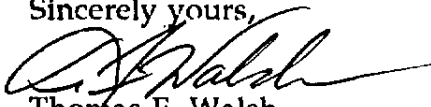
It is their sincere belief that they never received the original renewal either because it was not delivered, or because the mail at their shop may have been improperly removed by others. In any case, they are seeking relief from the penalty for late filing.

Both parties to this corporation share the work of a small pizza parlor and neither makes more than the bare necessities of living from the work. This penalty would present them with a real hardship.

Please have mercy on them.

Thank you for your time and kind consideration.

Sincerely yours,

  
Thomas F. Walsh  
Certified Public Accountant

enc. 1997 Corporate Annual Return for Palermo, Inc.