

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**May 15 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 # P94000037604 (3)**

1. Corporation Name  
**PALM GENERAL CORPORATION**



Principal Place of Business  
**31731 NORTHWESTERN HWY., SUITE 200-E FARMINGTON HILLS MI 48334**

Mailing Address  
**31731 NORTHWESTERN HWY., SUITE 200-E FARMINGTON HILLS MI 48334-1668**

3. Date Incorporated or Qualified **05/16/1994** 3a. Date of Last Report **05/01/1996**  
 4. FEI Number **65-0494281** 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. **Suite 250W**  
 22 City & State  
 23 Zip  
 24 Country

2a. Mailing Address  
 26 Suite, Apt. #, etc. **Suite 250W**  
 27 City & State  
 28 Zip  
 29 Country

9. Name and Address of Current Registered Agent  
**LUPTAK, PAOLA M**  
**2205 CORPORATE BLVD. N.W., SUITE 240**  
**BOCA RATON FL 33431**

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 \_\_\_\_\_ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>VP</b>	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LARRY WILKINSON</b>	12 NAME	
STREET ADDRESS	<b>31731 NORTHWESTERN HWY STE 200E</b>	13 STREET ADDRESS	
CITY-ST-ZIP	<b>FARMINGTON HILLS MI 48334-1654</b>	14 CITY-ST-ZIP	
TITLE	<b>PD</b>	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BEZOS, HAROLD</b>	22 NAME	
STREET ADDRESS	<b>31731 NORTHWESTERN HWY, #200E</b>	23 STREET ADDRESS	
CITY-ST-ZIP	<b>FARMINGTON HILLS MI</b>	24 CITY-ST-ZIP	
TITLE	<b>VPD</b>	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LUPTAK, JERRY D</b>	32 NAME	
STREET ADDRESS	<b>31731 NORTHWESTERN HWY #200E</b>	33 STREET ADDRESS	
CITY-ST-ZIP	<b>FARMINGTON HILLS MI</b>	34 CITY-ST-ZIP	
TITLE	<b>VP</b>	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHUMAKER, DON</b>	42 NAME	
STREET ADDRESS	<b>31731 NORTHWESTERN HWY, STE 200E</b>	43 STREET ADDRESS	
CITY-ST-ZIP	<b>FARMINGTON HILLS MI</b>	44 CITY-ST-ZIP	
TITLE	<b>S</b>	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BEZOS, MAURICE J</b>	52 NAME	
STREET ADDRESS	<b>31731 NORTHWESTERN HWY STE 200E</b>	53 STREET ADDRESS	
CITY-ST-ZIP	<b>FARMINGTON HILLS MI</b>	54 CITY-ST-ZIP	
TITLE	<b>T</b>	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BEZOS, NORMAN</b>	62 NAME	
STREET ADDRESS	<b>31731 NORTHWESTERN HWY STE 200E</b>	63 STREET ADDRESS	
CITY-ST-ZIP	<b>FARMINGTON HILLS MI</b>	64 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)(f), 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: *[Signature]* **Maurice Bezos 11-28-97 (811) 737-1155**

CR2E034 (9/96)