

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000037604

FILED  
Apr 08, 2010  
Secretary of State

Entity Name: PALM GENERAL CORPORATION

**Current Principal Place of Business:**

31731 NW HWY  
STE. 250W  
FARMINGTON HILLS, MI 48334 US

**New Principal Place of Business:**

**Current Mailing Address:**

31731 NW HWY  
STE. 250W  
FARMINGTON HILLS, MI 48334 US

**New Mailing Address:**

FEI Number: 65-0494281      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUPTAK, PAOLA M  
2201 NW CORPORATE BLVD #100  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: BEZNOS, MAURICE  
Address: 31731 NORTHWESTERN HWY, #250W  
City-St-Zip: FARMINGTON HILLS, MI

Title: VSD  
Name: BEZNOS, NORMAN  
Address: 31731 NORTHWESTERN HWY, #250W  
City-St-Zip: FARMINGTON HILLS, MI

Title: VP  
Name: SHUMAKER, DON  
Address: 31731 NORTHWESTERN HWY, #250W  
City-St-Zip: FARMINGTON HILLS, MI

Title: V  
Name: LUPTAK, PAOLA  
Address: 4700 NW BOCA RATON BLVD, 4TH FL  
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MAURICE J BEZNOS

PTD

04/08/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date