04-20-1999 90009 049 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P94000046496**

1. Corporation Name

PM CONCEPTS II, INC.

Principal Place	of Business	Mailing Address				
4524 GUN CLUI	B ROAD	4524 GUN CLUB ROAD				
209	•	209		DO 1107 11/DE	TE 11 THE OBJOE	
	ST PALM BEACH FL 33415 WEST PALM BEACH FL 3341		3415		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualifed		į
				06/17/1994		
	lace of Business	2a. Mailing Address	N11 -	4. FEI Number	Applied	
21 1489			11 ilitary les	65-0505282		plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-	5. Certificate of Status Desired	□ \$8.75 Addi	
22 114		27 114			Fee Requir	red
City & State	e	City & State	 1	6. Election Campaign Financing	□ \$5.00 May	
23 WPB	<u> </u>	28 WPB		Trust Fund Contribution	Added to Fe	ees
Zip	Country	Zip	Country	This corporation owes the curr		
24 3340	09 25 USA	29 33409	30 US F	Personal Property Tax.	☐ Yes ☐!	No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New F	Registered Agent	
			81 Name			
	, JAMES R.	ddress (P.O. Box Number is Not Accepta	able)			
2000	PALM BEACH LAKES BLVD		82 Street A	duress (F.O. Box Humber is Not Accept	2010)	
STE 1002						
WES	T PALM BEACH FL 33409				1	
			84 City		FL 85 Zip Code	e
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above-named of	orporation submits this statement for the	purpose of changing its reg	istered
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligation	i Florida. Such change was :	authorized by the corboi	ration's board of directors. I hereby accep	ot the appointment as registe	erea
SIGNATURE					·	
0.0.0	Signature, typed or printed name of registered agent		E: Registered Agent signature re		DATE	151.40
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF		Addition
TITLE	D	☐ DELETE	1.1 TITLE		Change [
NAME	BASCH, PETER J		1.2 NAME		· (# u)/	
STREET ADDRESS	4524 Gun Club Road Ste 20	9	1.3 STREET ADDRESS	1489 N MilitARY TR	DALL TIME	
CITY+ST-ZIP	WEST PALM BEACH FL		1.4 CITY-ST-ZIP	WPB T-1 33409		
TITLE	D ·	☐ DELETE	2.1 TITLE	•	. Change [Addition
NAME	KLEIN, MICHAEL J		2.2 NAME	- 1 /	- 1.0.0	
STREET ADDRESS	4524 GUN CLUB ROAD STE 20	9	2.3 STREET ADDRESS	1489 N Military T	RASI #114	_
CITY-ST-ZIP	WEST PALM BEACH FL	•	2.4 CITY-ST-ZIP	WPB F1 3340	ร์ .	
TITLE	West Friend Bestering	☐ DELETE	3.1 TITLE	, , , , , , , , , , , , , , , , , , , 		Addition
NAME :			3.2 NAME	•		
l i	<u> </u>		3.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		Change [Addition
TITLE	,	☐ DELETE	4.1 TITLE		□ cuange [
NAME		•	4. 2 NAME	•		
STREET ADDRESS	•		4.3 STREET ADDRESS		•	
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
MILE		☐ DELETE	5.1 TITLE	•	☐ Change [Addition
NAME	•		5.2 NAME			
STREET ADORESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change [Addition
NAME			6.2 NAME	•		
	1 .		1			
STREET ADDRESS			6.3 STREET ADDRESS	•		

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP