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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400072366 (5)

PALMETTO PARK ENTERPRISES, INC.

FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										
2300 CORPORATE BLVD			600 FAIRWAY DB #101							
SUITE 236			DEERFIELD BOH FL 33441				DO NOT MIDITE IN THE	00405		
BOÇA RATO	N FL 33431						DO NOT WRITE IN THIS SPACE			
US							3. Date Incorporated or Qualified			
2. Principal Place of Business 2e. Mailing Address							10/03/1994 4. FEI Number		and a final	
21	and of Business.		OO CORP	ORATE	Bu	٥Δ.		·	pplied For ot Applicable	
I Suite, Apt.	#, etc.		Suite, Apt #, etc.				65-0524320	¢0.75		
22			236				5. Certificate of Status Desired	•	equired	
i City & Stat	е	City_8	State				6. Election Campaign Financing		May Be	
23		28 750	CA KA	オピオー	11	ORIDA	Trust Fund Contribution		to Fees	
[Zip	Country	Zip		Co	untry	,	8. This corporation owes or has paid the cu	rrent vear In	tangible	
24	25	29 3	3431	30			· ·		□ No	
	g, Name and Address of Curre	nt Registered A	gent				10, Name and Address of New Registered	Agent		
GR	AFF, STUART W				81	Name				
2300 CORPORATE BLVD					82	Street Ad	Idress (P.O. Box Number is Not Acceptable)			
	ITE 236						1. (or por (to line) to (to) (hoophable)			
BOCA RATON FL 33431					83					
					84	City			Code	
					04	City	FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1508	Florida State	ites, the a	bove	e-named co	orporation submits this statement for the purpose of	of changing i	ts registered	
office or r	registered agent, or both, in the State im f amili ar with, an d a ccept the oblig	eot Florida, Sucl ations of, Sectio	h chan ge wa s in 607.0505. E	authorize Iorida Sta	ed by dules	the corpor	ralion's board of directors. I hereby accept the app	pointment as	registered	
SIGNATURE			.,			•				
BIGIVATORE	Signature, typed or printed name of registered ag-	nt and little if applicat	ile (NC	II Registere	d Ago	nt signature req	guired when reinstating) DATE			
12.		D DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12	
THTLE	PD		☐ DELET E	1,1 7	ITLE			☐ Change	Addition	
NAME	\$MITH, BARRY			1.2 N	AME					
STREET ADDRESS	7111 MELROSE CASTLE LAN	IE		1.3 S	TREET	ADDRESS			1	
CITY-ST-ZIP	BOCA RATON FL			1.4 0	IJY - S	1- 21P				
TITLE	\$D		☐ DELETE	2.1 T	ITLE			☐ Change	Addition	
NAME	GRAFF, STUART W.			2.2 N	IAME				ŧ	
STREET ADDRESS	7115 AYRSHIRE LANE			2.3 S	TREET	ADDRESS				
CITY-ST-ZIP	BOCA RATON FL			2 4 (DITY-S	T - 71P				
TITLE	D		☐ DELETE	311	ITLE			☐ Change	Addition	
NAME	Graff, Paula			3.2 N	IAME	i				
STREET ADDRESS	7115 AYRSHIRE LANE			3.3 S	TREET	ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		-	3.4. 0	CITY-S	T - Z(P				
TITLE			DELETÉ	4.1 1	ITLE			Change	Addition	
NAME				4.21	NAME					
STREET ADDRESS				4.3 S	TREET.	ADDRESS				
CITY-ST-ZIP				4.4 C	(1 y- \$1	I~ 2IP				
TITLE			DELETE	5.1 TI	ΠE			☐ Change	Addition	
NAME				5.2 N	AME					
STREET ADDRESS				5.3 \$	TREET	ADDRESS				
CITY-ST-ZIP				5.4 C	ITY-S1	1-7IP				
TITLE	_ ,		DELETE	6 1 TI	TLE		,	☐ Change	Addition	
NAME	•			62 N	AME					
STREET ADDRESS				635	THEFT	ADDRESS				
CITY-ST-ZIP					ITY-\$1					
	ertify that the information supplied w	th this filing doc	s not qualify				in Section 119 07(3)(i) Florida Statutes, Lifurther or	artify that the	information	

indicated on this annual report or supplied which instrumed 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 blexecute 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.

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