

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 12:52

DOCUMENT # **P94000077288 (6)**

1. Corporation Name
PALM PLAZA PROPERTIES, INC.

Principal Place of Business Mailing Address
1900 GLADES ROAD SUITE C **1900 GLADES ROAD SUITE C**
BOCA RATON FL 33432 **BOCA RATON FL 33432**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
10/19/1994

4. FEI Number Applied For
65-0532808 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **190 W. Glades Road, Ste C** 26 **190 W. Glades Road, Ste C**
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 27
City & State City & State
23 **Boca Raton, FL 33432** 28 **Boca Raton, FL 33432**
Zip Country Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

GRANET, LLOYD 81 Name **Harry Zuker**
5200 TOWN CENTER CIRCLE SUITE 105 82 Street Address (P.O. Box Number is Not Acceptable) **190 W. Glades Road, Suite C**
BOCA RATON FL 33486 83
84 City **Boca Raton** FL 85 Zip Code **33432**

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 **President** DATE **4/14/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	VP T Asst. Secy <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUPO, JACK	12 NAME	
STREET ADDRESS	1900 GLADES ROAD SUITE C	13 STREET ADDRESS	
CITY, ST, ZIP	BOCA RATON FL 33432	14 CITY, ST, ZIP	
TITLE	D	21 TITLE	P Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZUKER, HARRY	22 NAME	
STREET ADDRESS	1900 GLADES ROAD SUITE C	23 STREET ADDRESS	
CITY, ST, ZIP	BOCA RATON FL 33432	24 CITY, ST, ZIP	
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY, ST, ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **HARRY ZUKER** DATE **4/14/95**