

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 APR 12 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000078326 (3)

1. Corporation Name

PALLY IMPORTING COMPANY, INC.

Principal Place of Business

1110 BRICKELL AVENUE 7TH FLOOR
MIAMI FL 33131

Mailing Address

1110 BRICKELL AVENUE 7TH FLOOR
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/24/1994
3a. Date of Last Report N/A

4. FEI Number 65-0484282
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. 193.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 1110 Brickell Ave
Suite, Apt. #, etc. 7th Floor
City & State Miami Fla.
Zip 33131 Country USA
2a. Mailing Address
26 Same
Suite, Apt. #, etc.
City & State
Zip Country

9. Name and Address of Current Registered Agent

LEVINE, ROBERT J ESQ.
1110 BRICKELL AVENUE 7TH FLOOR
MIAMI FL 33131

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 must be printed name of registered agent and filed a declaration

NOTE: Registered Agent signature required when transferring

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP
1. Sam JACOBSON PRES 815 PARK Avenue N.Y. NY 10021
2. Mark JACOBSON VP 91 One Rd. E. Quogue NY 10942
3.
4.
5.
6.
7.
8.
9.
10.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME 000001455100
1.3 STREET ADDRESS -04/13/95--01006--001
1.4 CITY ST ZIP ****200.00 ****200.00
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 110.07(3)(b), 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 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Samuel Jacobson 3/30/95