PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000085994

1. Corporation Name

DISPATCH SERVICE OF PALM BEACH, INC.

Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90024 028 ***150.00



						IEIDI OILIE ID	
Principal Place of Business Mailing Address							
3878 PROSPECT AVENUE 3878 PROSPECT AVENUE							
SUITE 10 SUITE 10						·	
W PALM BEACH FL 33404 W PALM BEACH FL 33404				DO NOT WRITE IN THIS SPA		SPACE	
					3. Date Incorporated or Qualifed 11/21/1994		
Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
21 2460 METROCENTRE BLVD. 26 2460 METROCENT			RE BLVD.		65-0539541		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			-, .= >	5. Certifcate of Status Desired		5 Additional	
27				5. Certificate of Status Desired	Fee	Required	
City & State City & State				6. Election Campaign Financing \$5.00 May Be			
23 WEST PAIM BEACH, FL. 28 WEST PAIM BE		28 WEST PALM BEAC	CH, FL		Trust Fund Contribution	Adde	d to Fees
Zip Country Zip		Country	Country 8. This corporation owes the current year Intangible				
24 33407 25 29 33407 30]		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curre				10. Name and Address of New Registered	Agent	
			81	Name	_		
GERST, MICHAEL R			MTCHAET, R. GERST. 82 Street Address (P.O. Box Number is Not Acceptable)				
	PROSPECT AVENUE		02		PRESIDENTIAL WAY		
SUITE 10			83	<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	772.2		
W P/	ALM BEACH FL 33404					- 1 - 1 -	
			84	City WEST	PALM BEACH FL	.33	p Code 3401
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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12. OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
TITLE	D	DELETE	1.1 TITLE			X Chang	
NAME	GERST, MICHAEL R	•	1.2 NAME		GERST, MICHAEL R.		i
\	923 9TH WAY _			TADORESS	1922 PRESIDENTIAL WAY		
STREET ADDRESS	W PALM BEACH FL 33407		1.4 CITY-S	1	WEST PALM BEACH, FL 33401		
CITY-ST-ZIP	W FALW BEACTIFE 30407	- DELETE:	2.1 TITLE *		and the state of t	- Chang	e - Addition
~TITLE			2.2 NAME				_
NAME				* * * * * * * * * * * * * * * * * * * *			
STREET ADDRESS			2.3 STREET	l l			
CITY-ST-ZIP			2.4 CITY-S	ST-ZIP		☐ Chang	e Addition
TITLE		☐ DELETE	3.1 TITLE		·		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP_			3.4. CITY-5	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE	ŀ		☐ Chang	ge Addition
NAME			4.2 NAME				
STREET ADDRESS		'	4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE	T		Chang	ge
NAMÉ			5.2 NAME	1			
STREET ADDRESS			5.3 STREET	T ADDRESS	•		
C/TY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Chang	ge Addition
NAME			6.2 NAME	-			ĺ
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-S	T-ZiP			

CITY-ST-ZIP 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 other like empowered.

SIGNATURE: