

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000087798 (2)**

1. Corporation Name

~~PALM AIRE VENTURES, INC.~~

P.A. Management, Inc.

Principal Place of Business

307 S 21ST AVE
HOLLYWOOD FL 33020
US

Mailing Address

307 S 21ST AVE
HOLLYWOOD FL 33020
US



3. Date Incorporated or Qualified **12/02/1994** 3a. Date of Last Report **05/01/1995**

4. FEI Number **65-0546004** 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. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KORN, GARY A ESQ.
20803 BISCAYNE BLVD.
SUITE 200
AVENTURA FL 33180

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 typed or printed name of registered agent and official approver

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
VD	BIRDMAN, HARVEY	307 S 21ST AVE	HOLLYWOOD FL	<input type="checkbox"/>
PD	HIRSCH, HERBERT	307 S 21ST AVE	HOLLYWOOD FL	<input type="checkbox"/>
TDV	BIRDMAN, DIANE	307 S 21ST AVE	HOLLYWOOD FL	<input type="checkbox"/>
SVD	BIRDMAN, LOUIS	307 S 21ST AVE	HOLLYWOOD FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. CHANGE	6. ADDITION
			Hollywood, FL 33020	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			Hollywood, FL 33020	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			Hollywood, FL 33020	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			Hollywood, FL 33020	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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4-19-96

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Louis Birdman

4/2/96 954-922-6070

CR2E034 (12/95)