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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P95000022245 (1) 1. Corporation Name UNDISCOVERED STOCKS, INC.									
Principal Place of Business Mailing Address							ABIII BAIIA HAI		Bladt BHI 1981
4176 BURNS ROAD 4176 BURNS ROAD PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS I			S FL 33410	FL 33410					
. I NEW DENVI	TOTAL PERSON	THE SERVICE OF THE SE	0 1 2 3 3 1 1 0			3. Date Incorporated or Qualified	3a. Date	of Last Re	port
						03/20/1995			
Principal Place of Business 2a. Mailing Address						4. FEI Number	0.		pplied For
26			- 			65-056665	ď		lot Applicable
Suite, Apt. #	Suite, Apt. #, etc.	∌, Apt. #, etc.			5. Certificate of Status Desired		,	Additional Required	
City & State	City & State	State			6. Election Campaign Financing) May Be	
23	r =	8				Trust Fund Contribution			to Fees
Zip	Country Zip			itry		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ▼ Yes No			
24	25 29 30					Florida Statutes Yes 10. Name and Address of New F			
	9. Name and Address of Current Re	gistered Agent		81 Na		10. Name and Address of New P	edistator y	Aeur	
WARE BUILD II III					-				
Ward, Philip H III 1555 Palm Beach Lakes BLVD.] '	82 Str	eet Addre	ss (P.O. Box Number is Not Acceptat	ile)		
SUITE 1000			Ī	83					
W PALM BEACH FL 33401			l-	B4 Cit				85 Zip	Code
				84 Cit	у		FL	183 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 title if applicable. NOTE: Registered Agent signature required when reinstating: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12									
12.	Pres, Treas.	TECTORS DELETE	13. 1.1 Til	n F		ADDITIONS/CHANGES TO OFF		7 Change	Addition
NAME	weiss, Martin D.	☐ Victio	1.2 NA				_	,,	
STREET ADDRESS	HTY BUTHS Rd			1.3 STREET ADDRESS					
City-S1-ZiP	Palm Beach Gardens, FL 33410			1.4 CHY-ST-ZIP					1
TITLE	1 ptitit			2 1 TITLE				Change	Addition
NAME	Micholas, Dana K.		2 2 NAI	ME					
STREET ADDRESS	4176 Burns Rd.		2.3 STF	REET ADDR	ESS				
City-St-ZIP	Palm Beach Gardens PL 38410			2.4 CITY - ST - ZIP					
TITLE	underwood, leslie B.	☐ DELETE	3 1 Til				Ĺ.	Change	Addition
NAME	4176 Burns Rd.			3.2 NAME					
STREET ADDRESS				3.3 STREET ADDRESS 3.4 City-St-Zip					
CITY-ST-7IP TITLE	Palm Beach Gardens	DELETE	4, 1 10					Change	Addition
NAME		<u> </u>	4.2 NA				_	-	
STREET ADDRESS				REET ADDR	ESS				ļ
CITY-ST-ZIP			4 4 CH	Y-SI-ZIP					
TITLE		☐ DELETE	5 1 Ti	TLE				Change	☐ Addition
NAME			52 NA						
STREET ADDRESS				reet addf					
CITY-S1-ZIP		PT Dr. Ext		IY-ST-ZIP				T Change	Addition
TITLE		☐ DELETE	6.110		ļ		L	Change	☐ Addition
NAME			6.2 NA		ecc.				
STREET ADDRESS				REET ADDE					
City-St-ZiP	by certify that the information supplied with	this filing is voluntarily furn	ished and d	does no	t qualify fo	r the exemption stated in Section 119	.07(3)(k), Flo	rida Statut	es. I further

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 or hanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR