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

DOCUM	MENT # P9500	0024	1102 (2	2)					
THE P	ALS GROUP, INC								
Principal Place	of Business	Mailin	g Address	\$	***************************************	I (UB) UU (IE (B(D) D(A UD))	H QUART WELLE FRUIT I	1001 (1011 02110 1451 601	
1207 CAMEL FT. LAUDER	LIA LANE DALE FL 33326	1207 CAMELLIA LANE FT. LAUDERDALE FL 33326							
						3. Date Incorporated or Qualified 03/24/1995	3a. Date of	Last Report	
2. Principal Pla	ace of Business	2a. M. 26	ailing Address			4. FEI Number 65-0581738		Applied For Not Applicable	
Suite, Apt. :	#, etc.	Տւ 27	ite, Apt. #, etc			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	9	Cii	ty & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Ζιρ 24	Country 25	7 r	0	Countr 30	y	This corporation has liability for Florida Statutes Yes	intangible tax u		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
		-		81	Name				
GLICK, LISA P 1247 FAIRLAKE TRACE #1116				82	Street Ad	Idress (P.O. Box Number is Not Acceptat	ole)		
					1207				
FT. LAU	IDERDALE FL 33326			83]				
				84	City PT.L	AUDERDALE	FL	85 Zip Code 88326	
or register	to the provisions of Sections 607.050 red agent, or both in the State of Flo th, and accept the obligations of, Sec	rida. Such ch	lange was authori.	zed by the con	named corp poration's bo	ioration submits this statement for the public accept the applications. I hereby accept the app	rpose of changi jointment as rec	ng its registered office pistered agent. I am	
SIGNATURE	Styrioture, typed or the led han cip* registered age				ni' Sidha', irê redj.	ansi when narshing.	DATE		
12.	OFFICERS AI			13.		ADDITIONS/CHANGES TO OFF		RECTORS IN 12	
TITLE	D		DELETE	1. 1 TITLE	1	P/D		Onange 🔲 Addition	
NAME	GLICK, LISA P			1.2 NAME		SLICK LISA P 207 CAMELLIA LA FT. LAUDERDALE, F	NE.		
STREET ADDRESS	1247 FAIRLAKE TRACE #11			1.3 STREE	T ADDRESS	TTI ALLDRADALE E	L 58820	6	
CITY-ST ZIP	FT. LAUDERDALE FL 33326	 - -	DCLCT	1 4 CITY -		FILHUPERDACETT			
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NAME STREET ADDRESS	ALA MADELL PELL PELL D. MARTINE MAGA			2 2 NAME	1 ADDRESS				
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NAME				3.2 NAME					
STREET ADORESS				3.3 STRE	ET ADORESS				
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NAME				4.2 NAME					
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NAME				6.2 NAME			<u>.</u>	٠٠	
STREET ADDRESS					T ADDRESS				
CITY - ST - ZIP				6.4 CITY-					
14 Ldo bereb	y portify that the information supplier	Lasitia thric file	io io vad votaviju filo	nished and do	oe not avald	y for the exemption stated in Section 110	OZ/20/LA Espeid	a Statutes: I further	

rup increpty certify that the information supplied with this lifting is voluntarily turnished 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: JUST HICK LISA P. GLICK, PRESIDENT 4/29/96 (954)349-9947

CR2E034 (12/95)