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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000056017 (3)

SIJI PALM PROPERTIES, INC.

Principal Place of Business Mailing Address 321 ROYAL POINCIANA PLAZA 321 ROYAL POINCIANA PLAZA PALM BEACH FL 33480-4019 PALM BEACH FL 33480 3. Date Incorporated or Qualified 3a. Date of Last Report 07/18/1995 02/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65 ~ 0640046 Applied For APPLIED FOR Not Applicable 21 26 Suite, Apt #, etc. \$8.75 Additional Suite, Apt. # etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ACTERBURY, WILLIAM W III 321 ROYAL POINCIANA PLAZA Street Address (P.O. Box Number is Not Acceptable) 82 PALM BEACH FL 33480 83 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE. Signature, typed or printed name of region red agent and the if applicable (NCITE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Change ☐ Addition DELETE 1.1 TITLE THE **PSD** AL-SHARQI, SALEH M NAME 1.2 NAME P.O. BOX 888 1,3 STREET ADDRESS STREET ADDRESS FUJAIRAH UNITED ARAB EMIRATE 1.4 CITY - ST - ZIP CITY-ST-ZIF Change Addition DELETE 2.1 TILLE TITLE ATTERBURY, WILLIAM W III 2.2 NAME 321 ROYAL POINCIANA PLAZA 2 3 STREET ADDRESS STREET ADDRESS PALM BEACH FL 33480 2 4 CITY-ST-ZIF CITY - ST - ZIF Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. DITY - ST - ZIF CITY-ST-ZIP Change Addition ☐ DELETE 4 1 TITLE TIT.E 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-7/P Addition DELETE Change 6.1 TITLE TITLE 5.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP City - S1 - 7(P) 14. I do hereby certify that the information supplied with the 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. 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 chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, provided that my name 607, provided

WILLIAM W. ATTERBURY III

PHINTED MAME OF SIGNING OFFICER OR DIRECTOR