

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 20, 2004 8:00 am
Secretary of State

09-20-2004 90002 035 ***550.00

DOCUMENT # P95000085634

1. Entity Name

A & B SALES CORP. OF PALM BEACH, INC.



Principal Place of Business

12189 N US HWY ONE
STE 48
NORTH PALM BEACH FL 33408
US

Mailing Address

2187 MARSEILLE DRIVE
PALM BEACH GARDENS FL 33410-1279

2. Principal Place of Business

3. Mailing Address

420 West 43 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

19 F

City & State

City & State

New York

N.Y.

Zip

Country

Zip

Country

10026

U.S.A

4. FEI Number

65-0627530

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BALIK, ARTHUR
2187 MARSEILLE DRIVE
PALM BEACH GARDENS FL 33410-1279

Name

Arnold Schimmel

Str.

3829 Newhaven Lake Drive

City

Wellington

FL

Zip Code

33467

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Arnold Schimmel

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/20/04

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PTD	<input type="checkbox"/> Delete
NAME	BALIK, ARTHUR	
STREET ADDRESS	2187 MARSEILLE DRIVE	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410-1279	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	BALIK, BARBARA	
STREET ADDRESS	2187 MARSEILLE DRIVE	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410-1279	
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Arthur Balik ARTHUR BALIK (president)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/8/04

561-625-8635

Daytime Phone #