SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DIVISION OF CORPORATIONS										5001		, ,	_ ~	
DOCUMENT # P9600007873 (8) PINK PALACE MANAGEMENT, INC.														
Pri	Principal Place of Business Mailing Address									i iddiiadi iib idiid diiii di	 			
1546 MAIN STREET					1546 MAIN STREET									
DUNEDIN FL 34698			DUNEU	DUNEDIN FL 34698					DO NOT WRITE IN THIS SPACE					
									3.	. Date incorporated or	Qualified	3a. Date	of Last	Report
2. Principal Place of Business				2a Mai	iling Address	··				01/24/1996 FEI Number		<u>. </u>		Applied For
21	rinciparr	lace of Dusir	1030	26					"	59-339	3081			Not Applicable
	Sulte, Apt.	#, etc.		Suil	Suite, Apt. #, etc.				5.	. Certificate of Status D		П		Additional
22	22 City & State				City & State									Required
23	-			28					6.	 Election Campaign Fir Trust Fund Contributio 				D May Be I to Fees
-	Zip	p Country			Zip				8.	8. This corporation owes or has paid the current year Inlangible				
24		25 29 30 9. Name and Address of Current Registered Agent				30	Perso			Personal Properly Tax				□ No
	TUE						81	Name	10.	, Name and Address o	THEW HE	Istered A	gent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET									-1-1	0.0 D- 11 - 1 11	A (-)	->		
SUITE 105									aaress (I	P.O. Box Number is Not	Acceptabl	e)		
TALLAHASSEE FL 32301														
								City				FL	85 Zıç	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a								-named r	corporatio	on submits this statemen	it for the pi	rpose of o	hanging	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 appoil agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											ntment a	s registered		
SI	SNATURE					•								
12		Signature, typed	or printed name of registers	d agent and title if app AND DIRECTOR		E · Registered	Ager	it signature r		n reinstating) ADDITIONS/CHANGES	TO OFFIC	DATE EDO AND I	NECTO	ADC IN 10
TITL	E	Vice F	certain		DELETE	1.1 1/1	LE	Т		ADDITIONS/CHANGES	10 01110		Change	
NAN	AE :	SARAH	AMACARIO	ه در.		1.2 NA	ME	ĺ						
NAME STREET ADDRESS CITY-ST-ZIP SACAHAMACA STOLAKEUTEN PALA HARBOT			Kevieword			1.3 STI	ŒET ,	ADDRESS						
CIT	Y-ST-ZIP	paun	HARBOR 17	J4683	DELETE	1.4 CIT 2.1 TiT		- ZIP					Change	Addition
NAN					_ becce	2.1 HI		- 1				L	Change	AGOIIIOII
	EET ADDRESS							ADDRESS						
CIT	Y-ST-ZIP					2. 4 Cl	IY-\$	I - ZIP						
TITE	-				L DELETE	3.1 TIT						Ĺ	Change	☐ Addition
NAM	me Eet address	}				3.2 NA		ADDRESS						
	Y-ST-ZIP					3.3.316 3.4. Cl		- 1						
TIE					DELETE	4.1 TIT		1					Change	Addition
NAN						4. 2 NA	ME							
	EET ADDRESS							ADDRESS						ļ
CIT	(-51-ZIP .E				☐ DELETE	4.4 CII 5.1 TIT		- ZIP					Change	Addition
NAN						5.2 NA						•		
	EET ADDRESS							ADDRESS						
	r-ST-ZIP			·	T1 x2.222	5.4 CIT	_	- ZIP					1 20	
TITL					DELETE	6.1 TIT		ĺ				Ĺ	Change	Addition
NAM	AE EET Address					6.2 NAI		ADDRESS						
	Y-ST-ZIP					6.4 CIT		1						

14. 1 do 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 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.

Aug Markey DEFOURTED

8/11/97

872 721-6328

FILED

Aug 25 1997 8:00am

Secretary of State