

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2001 8:00 am
Secretary of State

05-31-2001 90006 034 ***158.75

DOCUMENT #

1. Entity Name

Palm Beach Concierge, Inc.

Principal Place of Business

Mailing Address

Same

2328 S. Congress Ave #1A
 West Palm Beach, FL
 33406

2. Principal Place of Business

3. Mailing Address

Same

2328 S. Congress Ave #1A

Suite, Apt. # etc.

Suite, Apt. #, etc.

City & State

City & State

Same

West Palm Beach, FL

Zip

Country

Zip

Country

33406

USA

Same

Same

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Elyne Fiorella ~~Forgie~~

6468 Kirsten Way

Lake Worth, FL 33467

Name

Elyne Forgie

Street Address (P.O. Box Number is Not Acceptable)

6468 Kirsten Way

City

Lake Worth

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!
After MAY 1, 2001
Make Check Payable to Department of State

FEE IS \$150.00
Fee will be \$550.00
to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE	President/Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Elyne Forgie	
STREET ADDRESS	2328 S. Congress Ave #1A	
CITY-ST-ZIP	West Palm Beach, FL 33406	
TITLE	Vice President/Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Terrence J. Forgie	
STREET ADDRESS	2328 S. Congress Ave #1A	
CITY-ST-ZIP	West Palm Beach FL 33406	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-22-01 561-641-2177

CR2E034 (11/00)