

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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May 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000020345 (0)**

1. Corporation Name  
**PARTY CROWD PLEASERS, INC.**



Principal Place of Business <b>4595 CHERRY RD. WEST PALM BEACH FL 33417</b>	Mailing Address <b>4595 CHERRY RD. WEST PALM BEACH FL 33417-5984</b>
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2. Principal Place of Business 21 <b>4595 CHERRY RD</b>		2a. Mailing Address 26 <b>SAME</b>		3. Date Incorporated or Qualified <b>03/04/1996</b>		3a. Date of Last Report <b>N/A</b>	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27 <b>SAME</b>		4. FEI Number <b>65-0643423</b>		Applied For Not Applicable	
City & State 23 <b>West Palm Beach, FL</b>		City & State 28 <b>SAME</b>		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
Zip 24 <b>33417</b>		Country 25 <b>U.S.A.</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
Zip 29 <b>SAME</b>		Country 30 <b>SAME</b>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>SOUTHWEST PROFESSIONAL SERVICES OF FORT MYERS, INC. 13611 MCGREGOR BLVD., STE. #3 FT. MYERS FL 33919</b>				10. Name and Address of New Registered Agent			
81 Name				N/A			
82 Street Address (P.O. Box Number is Not Acceptable)				N/A			
83				N/A			
84 City				N/A			
85 Zip Code				FL N/A			

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Brian Ramkerrysingh (NOTE: Registered Agent signature required when reinstating) DATE 4-26-97

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		1.1 TITLE	PRESIDENT		
NAME	RAMKERRYSINGH, BRIAN			1.2 NAME	ANNEHE RAMKERRYSINGH		
STREET ADDRESS	4595 CHERRY RD.			1.3 STREET ADDRESS	4595 CHERRY RD.		
CITY-ST-ZIP	WEST PALM BEACH FL 33417			1.4 CITY-ST-ZIP	W.P.B. FL. 33417		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE	TREASURER		
NAME				2.2 NAME	BRIAN RAMKERRYSINGH		
STREET ADDRESS				2.3 STREET ADDRESS	4595 CHERRY RD.		
CITY-ST-ZIP				2.4 CITY-ST-ZIP	W.P.B., FL. 33417		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I 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.

SIGNATURE Brian Ramkerrysingh DATE 4-26-97 FILE NO. 603-5143

CR2E034 (9/96)