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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000024499 (1)

FILED Feb 04 1997 8:00am Secretary of State

PALM GROUP, INC.				1 LEGITER DIE ICHE GIED BRAN GENIE DE	nun 80/08 augu BiBil BiBiB (B/10 (Bl) (BB)
Principal Place of Business Mailing Address					1614 00110 11011 01911 <b>61810</b> 10110 1011 1001
THE SW. STH STREET					
1601 N.W 1195T 1601 N.W 1955					
MIAMI FI 32167 MIAMI			33167	3. Date Incorporated or Qualified 03/19/1996	3a. Date of Last Report
- 17	lace of Business	2a. Mailing Address	(1) 119ST	4. FEI Number	Applied For
21 16	*	26 1601 No	W 11954	61-06 104	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	MAMI F	City & State  AM 1		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be  Added to Fees
Zip >>	267 25 DAGE	. 29 Zip 3×167 3	Country ADE	This corporation has liability for Florida Statutes	r intengible tax under s. 199.032,  X Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
	HE ROCKER	)	81 Name	JONE POLL	CID
.,,,		,	82 Street Addre	ess (P.O. Box Number is Not Accepte	14 <sup>(1)</sup> ()
10	eor N.W. 1195	H _	83	TOOL NO !!	914
-	1/AMI FI 331	.61			
		1	[84] City <b>[}</b> -	MAMI	FI 85 Zin Code (7
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					
, 12.	OFFICERS AND		13.		ICERS AND DIRECTORS IN 12
Aure	D D PRECIPEN	□ DELETE	11 TITLE	1/ MESWEST	Change Addition
HAME	SALADIN, ALBERT R-	are ROPHEID	1.2 NAME	TOCK TOCKE	$\omega$
STREET ADDRESS	5971 N.W. 106TH COURT	1601 N.W.119 CF	1.3 STREET ADDRESS	1601 NW 1194	
CITY-ST-ZIP	WANTESTINE PRESENT	M(1/44(( 1 3-3/6 3/4 □ DELETE	1.4 CITY - ST - ZIP	HIMMI H	Change Addition
TITLE NAME	DANNY ROCATS	8 La Decrete	2.1 TITLE 2.2 NAME	Mesider	Change Addition
STREET ADDRESS	160 KW 1195	X Total	2.3 STREET ADDRESS	DANNY ROCA	C -
CITY-ST-ZIP	MIAMI HI 33	167	2. 4 CITY - ST - ZIP	160 H W W	\$1,7
TÜĻE		DELETE	3.1 TITLE	All VIME -1 -	Change Addition
NAME			3.2 NAME	_	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4 CITY-ST-ZIP		Change L Addition
NAME		C Descric	4.1 TITLE 4. 2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	\$.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	ν	B 1-V
CITY-ST-ZIP			5.4 CITY - S1 - ZIP	<u> </u>	
TITLE		☐ DELETE	6.1 TITLE	<b>00000207</b> -02/05/97010	Change Addition
CTREET ANADECE			6.2 NAME	-02/05/97010	173008 <sup></sup>
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	***165.00	
14. I do herel	L		for the exemption stated		
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.					