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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham'

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000027287 (7)

FILED Jun 04 1998 8:00am Secretary of State

25 Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Election Campaign Financing Trust Fund Contribution Adde Adde	Applied For Not Applicable 5 Additional Required 10 May Be d to Fees
BOCA RATON FL 33432 BOCA RATON FL 33432 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/27/1996 4. FEL Number 50 351 28 9 2 APPLIED 107 351 28 9 2 APPL	Not Applicable 5 Additional Required 60 May Be d to Fees Intangible
BOCA RATON FL 33432 BOCA RATO	Not Applicable 5 Additional Required 60 May Be d to Fees Intangible
3. Date Incorporated or Qualified 03/27/1996 2. Principal Place of Business 2a. Mailing Address 25 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 City & State 29 City & State 29 Country 29 Country 20 Country 20 Country 21 Country 21 Country 22 Country 25 29 Country 26 Suite, Apt. #, etc. 28 City & State 29 Country 20 Country 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent PALLET MANAGEMENT SYSTEMS, INC. ONE \$. OCEAN BLVD. #305 BOCA RATON FL 33432 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 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 agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. NOTE Registered Agent signature required when reinstance) DATE	Not Applicable 5 Additional Required 60 May Be d to Fees Intangible
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City & State Zip Country Zip Country B. This corporation owes or has paid the current year Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent PALLET MANAGEMENT SYSTEMS, INC. ONE S. OCEAN BLVD. #305 BOCA RATON FL 33432 81 Name Street Address (P.O. Box Number is Not Acceptable) #406 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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tile of applicable (NOTE Registered Agent signature required when reinstating) DATE	May Be ed to Fees Intangible
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Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
	ORS IN 12
TITLE PD DELETE 1.1 TITLE Chang	e Addition
NAME RICHARDSON, ZACHARY M 1.2 NAME	
STREET ADDRESS ONE S. OCEAN BLVD. #305 1.3 STREET ADDRESS	
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TITLE DELETE 6.1 TITLE Chang	
NAME 6.2 NAME	e Addition
STREET ADDRESS 6.3 STREET ADDRESS	e Addition
CITY-ST-ZIP 6.4 CITY-ST-ZIP	a Addition
14. 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 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;	e Addition