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 # P96000033425 (5)

PALM DRIVE INVESTMENT GROUP, INC.

FILED JApr 30 1997 8:00am Secretary of State

Principal Place		Mailing Address	· · · · · · · · · · · · · · · · · · ·		·····	-{			
241 SEVILLA A SUITE 805 CORAL GABLES		241-SEVILLA AVE OUTS-806- 1_CORAL-GABLES FL-80184-9080-		Pa					
		Manuel Gar 550 N.W.La	Jeur	Ne	RR	3. Date Incorporated or Qualified 04/17/1996	3a. D	ate of Last F	leport
2. Principal Pl	lace of Business	26. Mailing Address MIA	MIF	7	1.3312	6 4. FEI Number 65 - 073 5250	>		pplied For ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z(p)	Country 25	Zip 29	30 Cou	intry		This corporation has liability for Florida Statutes	X Yes	□ No	199.032,
	g. Name and Address of Curren	t Registered Agent				10. Name and Address of New I	legistered	Agent	
	iaga, carlos a			81	Name]
241 SEVILLA AVE. SUITE 805				62	Street Addi	ress (P.O. Box Number is Not Acceptable)			
	VAL GABLES FL 33134			83					
				84	City		FL	85 Zip	Code
11. Pursuant office or reagent. La	to the provisions of Sections 607.050 ogistered agent, or both, in the State in familiar with, and accept the obligi	2 and 607.1508, Florida Statu of Florida. Such change was alions of, Section 607.0505, Fl	tes, the al authorize orida Stat	bove d by tutes	e-named corp the corporal s.	poration submits this statement for the tion's board of directors. I hereby acc	purpose o ept the app	f changing i cointment as	ts registered registered
SIGNATURE	Signature, typed or prieted name of registered age	of and title it enrilicable (NO)	F Renistare	d Ana	ent einnature reaut	red when reinstating)	DATE		
12.	OFFICERS AN		13.	u Aye	in signature requi	ADDITIONS/CHANGES TO OF		DIRECTOR	8S IN 12
TITLE	PSD	DELETE	1.1 T/	TLE		1,001110110,011/41000 10 0,1	TOLINO PHIA	Change	Addition
NAME	ARRIAGA, CARLOS A		1.2 N	AME					
STREET ADDRESS	241 SEVILLA AVE. SUITE 805		1.3 \$1	TREET	ADDRESS	,			ľ
Cily-SI-ZIP	CORAL GABLES FL 33134		1.4 C	11Y-S	T-ZIP]
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NAME			62 N		}				
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STREET ADDRESS					ADDRESS				
City-ST-Zif	ar cartifut that the information supplies	d with this filing data not avail			T-ZiP	d la Castion 110 07/2/(i) Florida State	iton I furthe	e cortify that	Libo

I do hereby certify that the information supplied with this filling 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 of 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 open an attachment with an address.

11111

SIGNATURE:

Davtime Phone # 0182990