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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ' .

**FILED** 

Jun 05 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000037671 (0)**

PALMO	OS 11 INC.				
Principal Place of Business C/O RICHARO J. RAZOOK ONE S.E. THIRD AVE STE. 1700 MIAMI FL 83131		Mailing Address C/O RICHARD J. RAZOOK ONE S.E. THIRD AVE., STE. 1700 MIAMI FL 33131-1714			
				3. Date Incorporated or Qualified 05/01/1996	3a. Date of Last Report
<del></del>	lac <b>e o</b> f Business	2a. Mailing Address		4. FEI Number	Applied For
Sulte, Apt.	# alc	26 Suite, Apt. #, etc.		1000/03951	Not Applicable
22		27		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for int	
24	25  9. Name and Address of Curren		30	Florida Statutes  10. Name and Address of New Regi	
CT	CORPORATION SYSTEM	t Hogistorou Agent	81 Name	IV. Name and Address of New Negr	Stoled Wall
1200	SOUTH PINE ISLAND ROAD		0,	(8 (8 N - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	· · · · · · · · · · · · · · · · · · ·
	NTATION FL 33324		82 Street Addr	ess (P.O. Box Number is Not Acceptable	')
			83		
			84 City		85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida, Such change was a	es. The above-named corp ulhorized by the corporat	oration submits this statement for the pur ion's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
	m familiar with, and accept the obliga	itions of, Section 607.0505, Flor	rida Statutes.		
SIGNATURE	Signature, typed or printed name of registered ager	nt and little if applicable (NOT)	- Registered Agent signature requir	ed when reinstating)	DATE
12,	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	d Hereth, Hannjorg	☐ DELFTE	1.1 TITLE		Change Addition
CAN TAKE OF THIRD AND OTE 4700		1.2 NAME			
STREET ADDRESS	MIAMI FL 33131	E. 1100	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
Ctty-St-≱IP			2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	34. CHY-ST-ZIP		Change Addition
TITLE			4.1 TALE		Li change Li Adulton
NAME Street Address			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME	•	
STREET ADDRESS			5.3 \$TREET ADDRESS		
CITY-ST-Z#P			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TO LE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	ا بران		6.3 STREET ADDRESS		
CITY_CT_TID	<i>t</i>		GACITY ST. 7IP		1

14. I do hereby certify that the information supplied with this filing does not quality 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 trust of enpowered 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.