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

PROFIT CORPORATION ANNUAL REPORT 1997 DOCUMENT #PALLOOC Principal Place of Business 2. Principal Place of Business 21 Suite, Apt. #. etc. City & State 23 Zip 24 26

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED 97 AUG 12 AM 8: 42 TALLAHASSEE, FLORIDA

561-586-8898

Mailing Address 3500 Whitehall Drive, Apt 203 West Palm Beach, FL. 33401 3. Date Incorporated or Qualified 3a. Date of Last Report 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Ζıρ Country 8. This corporation has liability for intangible tax under s. 199.032. 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 82 Street Address (P.O. Box Number is Not Acceptable) 3500 White hall Drive. **R3** 84 City Zip Code 85 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 Signature typed or printed name of registered agmit and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change Addition 400002271304---08/19/97--01060--011 NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS 3340/ ****165.00 ****165.00 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE Change Addition NAME 2.2 NAME 2 3 STREET ADDRESS CITY - ST - ZIP 2 4 CITY - \$1 - 7/P TIŦLE 3 1 7/11/0 Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-ST-27 3.4. CITY - ST - ZIP DELFTE Change TITLE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7/P TITLE DELETE 61 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP 14. To 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 suppliemental appeal 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 13 if changed, on an attachment with an address.

ING OFFICER OR DIRECTOR

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Palm Beach Resort & Beach Club

Carol Groves General Manager 3031 South Ocean Boulevard Palm Beach, Florida 33480 Telephone 561-586-8898 Fax 561-533-6664

August 5, 1997

Annual Reports Filings
Division Of Corporations
P.O. Box 1500
Tallahassee, FL. 32303-1500

To Whom It May Concern:

Please find enclosed The Profit Corporation Annual Report for The Palm Beach Group Inc.

I contaced the Division Of Corporations and spoke with Doug and I explained that I did not recieve the Report. He faxed to me a copy of the information that was on file. I advised him of the new address but the old address was wrong and my mail was not forwarded. The old address was 12483 67th Street North not 6th Street North.

Doug advised me of how to obtain another report and suggested that I forward to you the information he faxed me as I should be able to pay the \$165.00 not \$550.00.

Sincerely,

Carol Groves

The Palm Beach Group

Cg/cg

Encls.