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

CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000072938 (9)

DARIA OF PALM BEACH, LTD, INC.

Principal Place of Business

630 US HIGHWAY 1 STE 102

Mailing Address

630 US HIGHWAY 1 STE 102

FILED Apr 28 1997 8:00am Secretary of State



NO PALM BEACH FL 33408		NO PALM BEACH FL 33408-4610			
				3. Date Incorporated or Qualified 09/04/1996	3a. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 0693	Applied For
21 63		26 SAME		65-0693	Not Applicable
Suite, Apt.	109	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	ALM BEACH	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33	408 25 PAIM BOH		Country 0	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes \textstyle No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
	RICH, BEVERLY		81 Name		
	US HIGHWAY 1 STE 102 PALM BEACH FL 33408		82 Street / 634	Address (P.O. Box Number is Not Acceptate U.S. 1716HWAY 1	ole) STE 109
			83		
			84 City NO	PALM BEACH	FL 85 Zip Code 8
OTTICE OF T	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligat	l Florida. Such chance was auf	thorized by the card	corporation submits this statement for the poration's board of directors. I hereby acce	ourpose of changing its registered of the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	and the it applicable (NOTE I	Registered Agent signature	see feed the crimbal and	DATE
12.	OFFICERS AND		13,	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELETE	1.1 TITLE	1,551,161,670,171,1626,76 61.16	Change Addition
NAME	DITTRICH, BEVERLY		1.2 NAME		
STREET ADDRESS	630 US HIGHWAY 1 STE 102		1.3 STREET ADDRESS	636 USHIGHWAY	1, STE 109
CITY-ST-ZIP	NO PALM BEACH FL 33408		1.4 CITY - ST - ZIP		}
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ZEL, BARBARA		22 NAME	it with made call t	0.5
STREET ADDRESS	630 US HIGHWAY 1 STE 102		2.3 STREET ADDRESS	636 USHIGHWAY 1	, 012 109
CITY-ST-ZIP	NO PALM BEACH FL 33408		2 4 Cily-St-ZIP		
TITLE		☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	-	
CITY-ST-ZIP		T pricte	3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			4. 2 NAME		
			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		C Deterit	5.2 NAME		The custos The Addition
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	5.4 CITY-ST-ZiP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - 21P		
74 1 7 1			0.4 OH 1-31-ZIF		

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 manual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name of the properties of the propertie