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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000017197

BANYAN STREET OF WEST PALM BEACH, INC.

Principal Place of Business

528-A CLEMATIS ST WEST PALM BEACH FL 33401

2. Principal Place of Business

25

City & State

Mailing Address

27

528-A CLEMATIS ST

WEST PALM BEACH FL 33401

2a. Mailing Address 26 518 Banyan

City & State

## May 03, 1999 8:00 am Secretary of State

05-03-1999 90046 004 \*\*\*150.00



DO NOT WRITE IN THI	S SPACE			
3. Date Incorporated or Qualifed 02/20/1998				
4. FEI Number	Applied For			
65-0814264	Not Applicable			
5.~Certificate of Status Desired	\$8.75 Additional Fee Required			
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			

8. This corporation owes the current year Intangible

Personal Property Tax.

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORNING, LAWRENCE 528-A CLEMATIS ST WEST PALM BEACH FL 33401 83	81 Nappa Orning, Lawrence
	82 Street Address (P.O.Bóx Number is NonAcceptable)
	83 West Palm Beach
	84 City 85 Zip Code

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 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.

30

SIGNATURE		NOTE 5	- A Anna A Alman	and when released	tool		DATE	<del>,</del>	\
	Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS	(NOTE: Re	gistered Agent signature re			ANGES TO OF		ID DIRECTOR:	S IN 12
12.	***	DELETE	13.					Change	Addition
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NAME	CORNING, LAWRENCE		1.2 NAME	500	timia	n Blvc	J		
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CITY-ST-ZIP	WEST PALM BEACH FL 33401	7	1.4 CITY-ST-ZIP	LVJEST 1	CYTAIL	DECEL	10	Change	Addition
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CITY-ST-ZIP			4.4 CITY-ST-ZIP						
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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 the informati 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 conforation or the receiver or project empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 or an attachment with an address, with all other like empowered.

SIGNATURE:

□No