

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90400 017 ***150.00

DOCUMENT # P98000064675

1. Entity Name

AMERICAN PALM BEACH LAND, INC.



Principal Place of Business

115 N.W. 167TH STREET
SUITE 300
MIAMI FL 33169

Mailing Address

115 N.W. 167TH STREET
SUITE 300
MIAMI FL 33169

2. Principal Place of Business

3. Mailing Address

Suite, A One SE 3rd Avenue
Suite 3100

City & S Miami, FL 33131

Zip

Suite, One SE 3rd Avenue
Suite 3100

City & Miami, FL 33131

Zip



MOORE CR2E034 (11/03)

4. FEI Number 65-0908138

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRACY, GRANVIL
~~115 N.W. 167TH STREET~~
~~SUITE 300~~
~~MIAMI FL 33169~~

Name
St Not Acceptable)
One SE 3rd Avenue
Suite 3100
C Miami, FL 33131

FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete
NAME GRANVIL, TRACY
STREET ADDRESS 115 NW 167 ST STE 300
CITY-ST-ZIP NMB FL 33169

TITLE ☒ Change ☐ Addition
NAME One SE 3rd Avenue
STREET ADDRESS Suite 3100
CITY-ST-ZIP Miami, FL 33131

TITLE DST ☐ Delete
NAME BEHAR, SABY
STREET ADDRESS 115 NW 167 ST STE 300
CITY-ST-ZIP NMB FL 33169

TITLE ☒ Change ☐ Addition
NAME One SE 3rd Avenue
STREET ADDRESS Suite 3100
CITY-ST-ZIP Miami, FL 33131

TITLE DV ☐ Delete
NAME JARVIS, BRUCE R
STREET ADDRESS 115 NW 167 ST STE 300
CITY-ST-ZIP NMB FL 33169

TITLE ☒ Change ☐ Addition
NAME One SE 3rd Avenue
STREET ADDRESS Suite 3100
CITY-ST-ZIP Miami, FL 33131

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GRANVIL TRACY 4/27/04 (305) 654-1600

Date Daytime Phone #