**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT. ÓF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILES SCUKETARY OF STATE SEVISION OF CORPORATION

00 OCT - \$0 PM 1:38

**DOCUMENT #** P98 0000 75 336 1. Corporation Name

PALM SPRINGS

INTERNATIONAL GROUP INC.

Principal Place of Business	Mailing Address			
2522 Lake Ellen Lane	P.O. Box	14493		
	Tampa F	1 33690	DO NOT WIGHT	E IN THIS SPACE
Tampa F1 33618	•		Date Incorporated or Qualifed	EINTHISSIACE
			3. Date incorporated or Qualified	06/03/99
O. D. C. al Disease of D. Sienes	2- Moiling Addross		4. FEI Number	Applied For
2. Principal Place of Business	2a. Mailing Address		4, FEI Mulliber	Not Applicable
21 P.O. Box 14493	Suito Act # etc			\$8.75 Additional
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Required
22	City & State		a El II Como de Electrica	<del></del>
City & State	<u> </u>		Election Campaign Financing     Trust Fund Contribution	□ \$5.00 May Be Added to Fees
23 Tampa Fi	28 Zip	Country	<del></del>	
— <sup></sup> -	<b>—</b>		<ol><li>This corporation owes the currer Personal Property Tax.</li></ol>	nt year intangible □ Yes ☑No
24 33690 25 U.S.A 9. Name and Address of Curren			10. Name and Address of New Re	
9. Name and Address of Curren	t Registered Agent	81 Name	IV. Harrie and Address of New No.	glatered Agent
			Gregory F. Bo.	uer
Grenne F.	Barrer	82 Street Addr	ress (P.O. Box Number is Not Acceptab	nel) _
5, 698, 9	30901	<u> </u>	777 S. Pala	n Auc Suite#1
Gregory F. 2522 Lake	Ellen Lane	83	Sarasota FI	34236
Tampa FI	33618	84 City	Jaragara Fr	85 Zin Code
·				FL.
11. Pursuant to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes, t	the above-named corp	poration submits this statement for the p	urpose of changing its registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	or Florida, Such change was author hons of Section 607.0505, <del>C</del> lorida	Statutes.	or's board or directors, Thereby accept	the appointment as registered
	From The		10	17/2,000
SIGNATURE Signature, typed or punted name of registered stem	t and the if applicable. (NOTE: Rigi	istered Agent signature require		PATE .
12. OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
MLE Director	☐ DELETE •	1.1 TITLE		☐ Change ☐ Addition
NAME Ross Scopelliti		1.2 NAME	2000024	222892
STREET ADDRESS P.O. BOX 14493		1.3 STREET ADDRESS	-10/12/	1223892 0001021009
CITY-ST-ZIP Tampa F1 3369	90	1.4 CITY-ST-ZIP		
TITLE		2.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>∫. 00 ****150.00</b> ☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS	1	2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE		3.1 TITLE		Change Addition
NAME	الأحدر بمهيل يستعجر ينحث	3.2 NAME		يها عرا العابية بالعب طيعتان
1		3.3 STREET ADDRESS		
STREET ADDRESS				
CITY-ST-ZIP		3.4. CITY-ST-ZIP		Change Addition
TITLE				
NAME		4. 2 NAME		
STREET ADDRESS	5	4.3 STREET ADDRESS		
C/TY-ST-ZIP		4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	• • • • • • • • • • • • • • • • • • • •	5.1 TITLE	0	
NAME		5.2 NAME	V Ch	. 1
STREET ADDRESS		5.3 STREET ADDRESS	$\mathcal{H}_{\mathcal{N}}$	(0//0
CITY-ST-ZIP		54 CITY-ST-ZIP		1 201
TITLE		6.1 TITLE	•	` Change
NAME	E .	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY. ST. 7ID		6.4 CITY-ST-ZIP		

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 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 trustee empowered 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, with all other like empowered.

SIGNATURE: \_

SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director October 7/2000

. -- 10

Oct 7 - 2000

Palm Springs Int. Group Inc P.O: Box 14493 Tampa F1 33690 813-835-7256.

Division of Corp.

Seon Toner

409 E. Gaines, St

Tailahassee F1 32399

Dear Sir,

Excuse the informality as our secretary was not present to type this letter. This letter is a request to reinstate the corporation as we had not received the annual report and not until recently to wedid we realize that it was adminsteralize dissolved. Had the report been sent our registered agent it would have been returned as the address has changed. · Can you kindly reinstate this corporation enclosed the fee and as we have time is of essence would annual report. As you kindly for a certificate of status 813-962-6631 as a business transaction of such. awaiting the confirmation your anticipated Thanking you in advance for cooperation.

Sinerally Yours
Palm Springs In Group The.