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

PROFIT CORPORATION annual redort

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S52181 MIKE PALATNIK ASSOCIATES INC.

(2)

DELETE

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DELETE

FILED Feb 24 1997 8:00am Secretary of State

Principal Place of Business Mailing Address) tebringin int milit stadt tiden baren jint nicht debri den fragt nicht sant		
9370 SW 1 ST PLANTATION FL 33324	9370 SW 1 ST PLANTATION FL 33324-2449				
			3. Date Incorporated or Qualified 05/13/1991	3a. Date of Last Report 03/05/1996	
2. Principal Flace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26	<u></u>	65-0264957	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5: Certificate of Status Desired	\$8.75 Additional	
22	27			Fee Hequired	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip Country	28 Zip	Cou try	Trust Fund Contribution	710000 101 000	
		30	This corporation has liability for in Florida Statutes	Yes No	
24 25 9. Name and Address of Curre		301	10. Name and Address of New Reg		
PALATNIK, MIKE			1 Name		
9370 SW 1 ST			MATUK, EILBEN		
PLANTATION FL 33324		32 Street Ago	ress (P.O. Box Number is Not Acceptabl	e)	
PANIAHOR I E 300E4		13	310 300 1 7)		
		34 Oity	PLANTATION, FZ 339	85 Zip Code	
11. Pursuant to the provisions of Sections 607,050	02 and 607.1508, Florida Statutes	s, the all we-named cor	poration submits this statement for the pu	rpose of changing its registered	
11. Fursuant to the provisions of Sections 607.05 office or registered agent, or both, by the State agent. I am farmillar with, and accept the other	e of Florida. Such change was au actions of, Section 607.0505, Flor	uthorized by the corpora rida Stallies.	ition's board of directors. I hereby accep	the appointment as registered	
SIGNATURE alen falah	IN RESIDENT	Eil	EEN PALATNIK	2/18/97	
Stgenture, typed or pot tire of registered ag			lred when reinstating)	DATE	
	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		
TILE DP	DELETE	11T D	MATUIK, EILEEN	Change Addition	
NAME PALATNIK, MIKE		1.21	MATHIC, LICE		
STREET ADDRESS 8370 SW 1 ST		1.3.5 LT ADDRESS	וכו עוב מראו	/	
CITY-ST-201 PLANTATION FL		1.4 C ST-ZIP	21/10/1/10W, PL 3331	24	
THEF	☐ DELETE	211		Change Addition	
NAME		2.21		ļ	
STREET ADDRESS		2.3 S F ADDRESS			
CHY+S1+ZIP		2. 4 SY-ZIP			
TOTLE	☐ DELETE	3.11		Change Addition	
NAME		3.21		l	
STREET ADORESS		3.3 TADDRESS			
CHY-S1-201		3.4/ S1-ZIP			

6.4 CI 14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and a Lam an officer or director of the corporation or the receiver or trustee empowered to el

ST-ZIP kemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the curate and that my signature shall have the same legal effect as if made under oath; that acute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

TITLE NAME

TITLE NAME

THLE

MM

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

COY-ST-7IP

City-St-7iP

ADDRESS

T-ZIP

ADDRESS

T ADORESS

ST-ZIP

5.1

5.3

6.1 T

6.2 N

6.3 S

Change

Change

Change

Addition

Addition

Addition