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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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DISTINCTIVE HOMES OF THE PALM BEACHES, INC.					1813 GIBU BIBU PERI SUB)) GUGU BUBU WEK
Principal Plac	ce of Business	Mailing Address			
12765 W. FOREST HILL BLVD. 12765 W. FOREST HILL SUITE 1302 SUITE 1302 WELLINGTON FL 33414 WELLINGTON FL 33414 US				DO NOT WRITE IN THIS SPACE	
55		US		3. Date Incorporated or Qualified	
2. Principal f	Place of Business	2a. Mailing Address		10/14/1991 4. FEI Number	l la criste
├ ────────────────────────────────────		26		65-0291892	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$9.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has p	
24	9. Name and Address of Currer	29	30	Personal Property Tax due June	
D4		it Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
	RKES, THOMAS K		o: Name		
12765 W. FOREST HILL BLVD			82 Street Add	dress (P.O. Box Number is Not Accepta	ble)
SUITE 1302 WELLINGTON FL 33414			83		
1 445	ELLINGTON FL 33414		[30]		
			84 City	-	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida St	atutes, the above-pamed cor	noration submits this statement for the	Purpose of changing its registered
office or a	egistered agent, or both, in the State	of Florida, Such change waters of Section 607 0505	ras authorized by the corpora	poration submits this statement for the ation's board of directors. I hereby acce	pt the appointment as registered
	ari dirima with, and accept the obliga	alions of, Section 607.0500	, Florida Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable.	(NOTE: Registered Agent signature requ	ired when reinstating)	DATE
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE		Change Addition
NAME			1.2 NAME		
Street Address	WELLINGTON EL		1.3 STREET ADDRESS		ļ
CITY - ST - ZIP	WELLINGTON FL DTS	Пост	1.4 CITY-ST-ZIP		
TITLE NAME	PARKES, THOMAS K.	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS	14049 PORT CIRCLE		2.2 NAME		
CITY-ST-ZIP	PALM BEACH GRONS FL		2.3 STREET ADDRESS	-	-
TITLE		DELETE	2. 4 CITY - ST- ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		onungo number
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE	-	DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		-
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP	- A)E, bt at AL - 1 - E	A 41 - 60	6.4 CITY-ST-ZIP		
officer or o	on inis annual report or sunniemental	i annual report is true and a iver or trustee empowered	accurate and that my cionatu	Section 119.07(3)(i), Florida Statutes. I re shall have the same legal effect as if uired by Chapter 607, Florida Statutes;	made under onthe that I am an

FILED

Feb 09 1998 8:00am

Secretary of State