FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1. Corporation Name

Principal Place of Business

1556 JASPER CT VENICE FL 34292



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 V16203 **DOCUMENT #**

(4)

Mailing Address

1556 JASPER CT

VENICE FL 34292

PALBRE ASSOCIATES, INC.

 -					
3. Date Incorporated or Qualified	3a. Date of Last Report				

						3. Date Incorporated or Qualified 02/21/1992	3a. Date	of Last He 1/10/199	рогі 5
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	I	Α	pplied For
21	ince of this idea	26				5-0325182		N	lot Applicable
Stille, Apt #	ł, elc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional lequired
22		City & State				6. Election Campaign Financing		\$5.00	May Be
City & State	,	28				Trust Fund Contribution		•	to Fees
2 3] Zip	Country	Zip	Cour	ntry		8. This corporation has liability for in	ntangible ta	x under s	199.032,
24	25	29	30			Florida Statutes 🔀 Yes	□ No		
	g, Name and Address of Curre					10. Name and Address of New R	egistered	Agent	
				81	Name				
RREGGI	ER, JOHN C.		}	82	Stroot Addre	ess (P.O. Box Number is Not Acceptable	(e)		
	SPER CT			"	Stroot Addit	033 (* 101 2011)			
	FL 34292		ľ	83					
VENIOL	16 04282							85 Zip	Code
				84	City		FL		0000
or register familiar wi	red agent, or both, in the State of Fix th, and accept the obligations of, Ser	ction 607.0505, Florida Statuti	98.	.O. P.	oration's boar	ation submits this statement for the pur d of directors. I hereby accept the appo	DATE		
	Stylint are typed or printed name of registered agr	ND DIRECTORS	13.	Agri	n signarure reconec	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
12.	OFFICENS A	DELFIE	1 1 Ti	TI F				Change	Addition
THE	BREGGER, JOHN C.		12 NA		1				
NAME	1556 JASPER CT				ADDRESS				
STREET ADDRESS	VENICE FL		1		S1 - 2IP				
CHY St ZIP	D	DELETE	2 1 1				1	Change	Addition Addition
1(LF	BREGGER, LOLA P.		2 2 NA						
NAM:	1556 JASPER CT		2351	TREET	ADDRESS				
STREET ADDRESS	VENICE FL		l l		5' - ZIP				
CHY, ST, ZIP	-	DELETE	3 1 T					Change	Addition
NAME		_	3 2 N	AME					
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City-St-Zift			340	ITY-S	ST-ZIP				
Till!		DELETE	4 1 7	HLE				Change	Addition
NAME:			4 2 N	AME					
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CITY - ST- ZIP			440	(1 Y -)	S1-7IP				P***
TIL.F		DELEJE	5 1 T	TITLE				☐ Change	Addition
NAME			5 2 N	IAME					
SINELL ADDRESS			538	THEE	1 AUDRESS				
C-1Y-ST-ZF			54 C	IIY-	ST-ZIP				
_ 911. 91 <u>**</u> TELE		DELETE	6 1 7	TITLE				Change	Addition Addition
NAME			621	AME	İ				
STEEL LADDRESS			63S	HEE	1 ADDRESS				
CITY ST ZIP			640)ITY -	ST-ZIP				1 14 "
4011						tos the exemption stated in Section 110	1717/31/61 F	orida Stati	res Liurther

14. Lob hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 early that I am an officer or effector 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 chapped, or on an attachment with an address.

SIGNATURE:

SIGNING OFFICER OF DIRECTOR

941-484-1964

CR2E034 (12/95)