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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V36713

(8)

PALEY INVESTMENTS, INC.

## **FILED** Apr 27 1998 8:00am Secretary of State



i i	ce of Business	Mailing Address		
232 SEA GULL LANE 232 SEA GULL LANE				
SARASOTA FL 34236		SARASOTA FL 34236		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				05/18/1992
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0342385 Not Applicable
Sulte, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired  \$8.75 Additional
22		27		Fee Required
City & Sta	ite	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution
Zip	Country	Zip	Country	This corporation owes or has paid the current year inlangible
24	25 25 Cur	29 3	0	Personal Property Tax due June 30. Yes No
	ALEY, RICKEY		01 (44)	
232 SEA GULL LANE			62 Stre	et Address (P.O. Box Number is Not Acceptable)
SARASOTA FL 34236			83	
			84 City	FL 85 Zip Code
11. Pursuan	to the provisions of Sections 607 (	502 and 607 1508 Florida Statutes	the above-name	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE Signature, typed or printed name of legistered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELET <b>e</b>	1.1 TITLE	☐ Change ☐ Addition
NAME	PALEY, RICKIE		1.2 NAME	
STREET ADDRESS			1.3 STREET ADDRES	s
CITY-ST-ZIP	SARASOTA FL		1.4 CITY - ST - ZIP	
TITLE		☐ DELETE	2.1 TITLE	Change Addition C
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRES	s
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS		'	3.3 STREET ADDRES	s
CITY-ST-ZIP	<u> </u>		34. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRES	S
CITY-ST-ZIP		Prince	4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRES	S
CITY-ST-ZIP		T onete	5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRES	S
CITY-ST-ZIP	north that the information of	1	6.4 CITY - ST - ZIP	die Cartin 440 07/0//) Flands Out des 1 fauts aurille statut inference

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 traffee 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.

941-366-3765