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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V58785

PALM BEACH MICROSYSTEMS INC.

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90020 033 ***150.00



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Principal Place of Business Mailing Address									
1760 SW 12 ST									
BOCA RATON FL 33486 BOCA RATON FL 33486					DO NOT WRITE IN THIS SPACE				
* ** '	and the second						5 SPACE		٦ .
					3. Date Incorporated or Qual	itea			1
					08/18/1992 4. FEI Number				4
2. Principal F	Place of Business	2a. Mailing Address	- · · · · · · · · · · · · · · · · · · ·				J	plied For] ;
21		26			65-0348239			Applicable] 👙
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desire	d 🖂	\$8.75 _{;A}		ds	
22		27		0 : 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Fee Red	quired]	
City & State		City & State		6. Election Campaign Finance	ing 🖂	\$5.00	May Be	ļ.	
23		28		Trust Fund Contribution		Added to	Fees		
Zip Country		Zip Country		8. This corporation owes the	current year In	ıtangible			
24	25	29 3	30		Personal Property Tax.		Yes	≥ No	1
	9. Name and Address of Current	Registered Agent	1		10. Name and Address of No	w Registered	Agent		1
140				81 Name			٠		
Person	FADDEN, THOMAS P. JR		ł	82 Street Add	ress (P.O. Box Number is Not Acc	entable)			1
1760 SW 12 ST				ou ou rad	198 Commission of the Acceptable				
BOCA RATON FL 33486				83 .	. 1939aaaa	A LEEDING COL	U4: 180):19 (en eren kan	1
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Jan Gay	See Section 19	•	ļ	84 City		Fi	85 Zip C	ode	1
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508. Florida Statutes	s the ab	ove-named corr	poration submits this statement for	the purpose of	f changing its	registered	1
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State of	Florida. Such change was aut	horized	by the corporati	on's board of directors. I hereby a	ccept the appo	intment as reg	istered	ſ
	am familiar with, and accept the obligation	ons or, Section 607,0505, Fibric	oa Statu	tes.			•		
SIGNATURE	Signature, typed or printed name of registered agent	and title if anglicable (NOTE: E	Pawistannel I	Agent signature require	ad when reinstating)	DATE			
12.	OFFICERS AND		13.	-gent signature require	ADDITIONS/CHANGES TO		ND DIPECTO	PC IN 12	\ 6
TITLE	D	DELETE	1.1 TITI	F	ADDITIONS/CITANGES TO	OI I ICEIG AI	Change	Addition	(- -
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	1 4544 014 44 45		1						F034
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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. The 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.