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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G57536 1. Corporation Name

PALM REACH FINANCIAL VENTURES, INC.

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Principal Place	e of Business	Mailing Address				1	7 100)(1) 6001 0(1)(1000) 6(106 (1)	ISB ATTE BIRĞI	I DIEN BIDIK BIB	
900 AVIS DR.		900 AVIS DR.	<u>-</u>							
ANN ARBOR MI 48108		ANN ARBOR MI 48108								
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ļ						3.	Date Incorporated or Qualifed			
2 Daineinal D	News of Durings	2a. Mailing Address				1	08/25/1983 FEI Number		- 	Applied For
2. Principal Place of Business		26			-	59-2327431		1	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			+				Additional	
22		27				5.	Certifcate of Status Desired			Required
City & State		City & State			6.	Election Campaign Financing		\$5.0	May Be	
23		28					Trust Fund Contribution	<u>ப</u>	Adde	d to Fees
Zip	Country	Zip	Coun	itry		8.	This corporation owes the curr	ent year I		_
24	25		30				Personal Property Tax.		Yes	□No
	9. Name and Address of Current	nt Registered Agent		81 N	lame	10.	Name and Address of New F	(egistere	a Agent	
. AVIS	, warren a., jr									
	U.S. HWY ONE, SUITE 435	a .	Į:	82 5	treet Addre	ess (F	P.O. Box Number is Not Accepta	able)		
CRY	STAL TREE PLAZA		1	83				2 (a Res	160 (3 %)	TOTAL
N. P.	ALM BEACH FL 33408			_				Amari		
Ì	•			84 (ity			F	85 Zi	p Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	s, the ab	ove-n	amed corpo	oratio	n submits this statement for the	purpose	of changing	its registered
office or r				1 41						
agent. I a	registered agent, or both, in the State im familiar with, and accept the obliga	e of Flonda. Such change was au ations of, Section 607.0505, Flori	thorized da Statul	by the	corporatio	n's b	oard of directors. I hereby accep	л ше арр	omanem as	registered
agent. I a	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was au ations of, Section 607.0505, Flori	thorized da Statul	by the	corporatio	n's b	oard of directors. I hereby accep	и ше арр	omment as	registered
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CITY-ST-ZIP 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 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS



734-761-2800

FILED

Feb 11, 1999 8:00am

Secretary of State 02-11-1999 90010 008 ***150.00