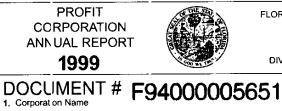
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

LA PALOMA HOLDINGS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90120 007 ***150.00

 					——	HOUR DOME BANK DANN	BBIDI BIKKO BKIDI A		
Principal Plac	e of Business	Mailing Address							
5935 BOULLEGER 9200 MILITARY TRAIL									
SUITE 207 BOYNTON BEACH FL 33436					DO.	DO NOT WRITE IN THIS SPACE			
MONTREAL-NORD QU HIGGE US					Date Incorporated or				
03					10/31/1994				
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number			led For	
21		26			NOT APPLICAE	LE	X Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certifcate of Status I	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & Stat	ze	City & State			6. Election Campaign F	inancing -	\$5.00 1	/av Be	
23	-	28			Trust Fund Contribut	- 11	Added to	~	
Zip	Country	Zip	Country		8. This co poration owe	s the current year to	itangible		
24	[25]	— — — — — — — — — — — — — — — — — — —		Personal Property Tax.				2¶No	
	9. Name and Address of Currer				10. Name and Address		Agent		
			81	Name		<u>-</u>			
FINE	et, Jaques		<u> </u>			-4 44-11:5			
	MILITARY TRAIL,		82	Street	Address (P.O. Box Number is N	ot Acceptable)			
	175		83						
	NTON BEACH FL 33436		30						
			84	City		F	85 Zip C	c de	
		10077500 51 11 01 1						valetorad	
. 11. Pursuant	to the provisions of Sections 607.050	of Florida Such change was aut	thorized by	the corpo	pration's board of directors. I her	eby accept the app	intment as reg	istered	
agent. I a	to the provisions of Sections 607.050 egistered agent, of both, in the State in familiar with and accept the obliga	prints of, Section 607.0505, Florid	da Statutés						
SIGNATURIE	X Xay	-7·1							
	Signature, typed or printed name of registered age			it signature re	equired when reinstating)	DATE			
12.		ID DIRECTORS	13.		ADDITIC NS/CHANGE	S TO OFFICERS /			
TITLE	P	DELETE	1.1 TITLE		EINET IACQUE	S	Change	Addition	
NAME	FRANK ROY		1.2 NAME		FINET, JACQUE 316 CH. BOMBA	RDIER			
STREET ADDRES S	45 CUMBERLAND LANE, #712	2	1.3 STREET	ADDRESS	MAC BROMPTON	RUE CAN			
CITY-ST-ZIP	AJAX ON		1.4 CITY-S	T-ZIP	1.4C 8 KE-47 7 E-				
TITLE	S	DELETE	2.1 TITLE		7	1-1/1/5/	Change	⊠ Addition	
NAME	BLANCHETTE, ELOISE F		22 NAME	1	BERNATCHEZ, JEAN	· - y + z s			
STREET ADDRESS	3439 CH. HEMMING		2.3 STREET	ADDRESS	921 DES EPILOBE	~ ~ ~ ~ .			
CITY-ST-ZIP	DRUMMONDVILLE, QUE., CAN	l.	2.4 CITY-5		BAIS COMEIN, QUE,	, CAN			
TITLE	V	☐ DELETE	3.1 TITLE		D		Change	Addition	
NAME	TAILLEFER, CLAUDE		3.2 NAME		MARTEL, PAUL				
STREET ADDRESS	209 DE LA CHAUDIERE			TADDRESS	GOY 7 SEE BRING C	IRCLE			
	ST NICOLAS QU		3.4. CITY-S		Alississauga, PMT.	CANADA			
CITY-ST-ZIP	T NICOLAS GO	☐ DELETE	4.1 TITLE	II-ZIF	· · · · · · · · · · · · · · · · · · ·	-	Change	Addition	
TITLE	ENET IACOUSTS		4.1 STICE 4. 2 NAME					_	
NAME	FINET, JACQUELS			T ABBOTOS					
STREET ADDRESS	316 CH BOMBARDIER			ADDRESS					
CITY- \$T-ZIP	LAC BROMPTON QU	— — — — — — — — — — — — — — — — — — —	4.4 CITY-S	T-ZIP			☐ Change	Addition	
TITLE	D	☐ DELETE	5.1 TITLE				спануе	☐ AddidOn	
NAME	MAURICE, BEAUDOIN J		5.2 NAME						
STREET ADDRESS				FADDRESS					
CITY-ST-ZIP	ST. GERMAIN, QUE., CAN.		5.4 CITY-S	T-ZIP					
TITLE	n	☐ DELETÉ	6.1 TITLE				Change	Addition	

64 CITY-ST-ZIP **REPENTIONY QU J6A 8** CITY-ST-ZIP 14. I hereby certify that the informat on supplied with this filling 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 a lother like empowered.

6.2 NAME

63 STREET ADDRESS

SIGNATURE:

MONETTE, MAURICE

212 NOTRE DAME, #304

TITLE

NAME

STREET ADDRESS