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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90120 006 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **F94000005652**

1. Corporation Name

LA PALOMA INVESTORS (SOUTH) INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**5835 BOULLEGER #207
 MONTREAL-NORD, QUEBEC H1G 6E1
 CANADA**

Mailing Address

**9200 MILITARY TRAIL
 BOYNTON BEACH FL 33436**

3. Date Incorporated or Qualified

10/31/1994

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip 30 Country

4. FEI Number

NOT APPLICABLE

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Electoral Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

**FINET, JACQUETS
 9200 MILITARY TRAIL
 LOT 175
 BOYNTON BEACH FL 33436**

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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

Jacques Finet

04/19/99

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	ROY, FRANK	
STREET ADDRESS	45 CUMBERLAND LN. #712, AJAX, ONTARIO	
CITY-ST-ZIP	CANADA L1F 7K3	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	BLANCHETTE, ELOISE F	
STREET ADDRESS	3439 CH. HEMMING, DRUMMONDVILLE, QUEBEC	
CITY-ST-ZIP	CANADA J2B 7T5	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MONETTE, MAURICE	
STREET ADDRESS	212 NOTRE DAME #304	
CITY-ST-ZIP	REPENTIANY QUE CA J6A8G	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BEAUDOIN, MAURICE	
STREET ADDRESS	194 CHEMIN DE LA STATION, ST. GARMAIN, QUE	
CITY-ST-ZIP	CANADA J0C 1K0	
TITLE	T	<input type="checkbox"/> DELETE
NAME	FINET, JACQUES	
STREET ADDRESS	316 CH. BOMBARDIER	
CITY-ST-ZIP	LAC BROMPTON QU	
TITLE	V	<input type="checkbox"/> DELETE
NAME	TAILEFER, CLAUDE	
STREET ADDRESS	209 CH DE LA CHAUDIERE	
CITY-ST-ZIP	ST NICOLAS OQ	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	FINET, JACQUES	
1.3 STREET ADDRESS	316 CH. BOMBARDIER	
1.4 CITY-ST-ZIP	LAC BROMPTON, QUE., CAN.	
2.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BERNATCHEZ, JEAN-YVES	
2.3 STREET ADDRESS	921 DES EPILOUES	
2.4 CITY-ST-ZIP	BAIE COMEAU,	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MARTEL, PAUL	
3.3 STREET ADDRESS	4047 SABBING CIRCLE	
3.4 CITY-ST-ZIP	MISSISSAUGA, ONT., CAN	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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 2 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jacques Finet* (**JACQUES FINET**) **04/19/99** (561) 732 1306

CR2E034 (1/198)