2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005652

LA PALOMA INVESTORS (SOUTH) INC

FILED Mar 17, 2004 Secretary of State

Entity Na	IME: LA PALOI	WA INVESTORS (SOUTH) INC	٠.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	A NEUVE-FRAN AN-SUR-RICHI	NCE ELIEU, QC J3B 1A7 CD			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
9200 MILITARY TRAIL BOYNTON BEACH, FL 33436			9200 S MILITARY TRAIL BOYNTON BEACH, FL 33436 US		
FEI Number	r:	FEI Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
9200 MILI ⁻ #033	RD, THERESE TARY TRAIL N BEACH, FL 3	33436 US			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TOURANGEAU, 6431 ST CHARI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BOUFFARD, TH 500 DE LA NEU		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LANCTOT, MICH 3 RUE DES PIN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S ()	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: THERESE BOUFFARD T 03/17/2004

BEAUCHEMIN, LUCIEN S

GATINEAU, QC. CANADA, CD J8R 3P1 CD

56 RUE DU DESERT

Name:

Address:

City-St-Zip: