

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L03852 (5)**
1. Corporation Name
REU-DOM INVESTMENTS & HOLDINGS INC.



Principal Place of Business: 1901 NW 18TH STREET, BUILDING B, POMPANO BEACH FL 33069-1611, US
Mailing Address: P.O. BOX 39588, FT LAUDERDALE FL 33339-9588, US

2. Principal Place of Business: 21 1207 S.W. 2nd STREET, Suite, Apt. #, etc.
22 City & State: 23 POMPANO BEACH FLORIDA
24 Zip: 33069-3209, 25 U.S.A.
2a. Mailing Address: 26 Suite, Apt. #, etc.
27 City & State: 28
29 Zip, 30 Country

3. Date Incorporated or Qualified: 07/24/1989
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0400058
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
REU-DOM & ASSOCIATES
3233 NE 34TH ST
#406
FT LAUDERDALE FL FL 33308

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP <input type="checkbox"/> DELETE	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHARE, REUBIN	12 NAME	
STREET ADDRESS	3233 N.E. 34TH STREET #406	13 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	14 CITY - ST - ZIP	
TITLE	VS <input type="checkbox"/> DELETE	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHARE, DOMINIQUE	2 2 NAME	
STREET ADDRESS	3233 N.E. 34TH STREET #406	2 3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	2 4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TETREAUULT, PETER	3 2 NAME	
STREET ADDRESS	442 MAIN RD.	3 3 STREET ADDRESS	
CITY - ST - ZIP	HUDSON, QUEBEC CANA	3 4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSENZVEIG, DAVID	4 2 NAME	
STREET ADDRESS	500 SHERBROOKE ST. WEST	4 3 STREET ADDRESS	
CITY - ST - ZIP	MONTREAL QUEBEC CANA	4 4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY - ST - ZIP		5 4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: _____ Date: 4/25/96 Daytime Phone #: (954) 784-2739

CR2E034 (12/95)