PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M66492

1. Corporation Name

A. GIGUERE, INC.

Principal Place of Business

Mailing Address

May 05, 1999 8:00 am Secretary of State

05-05-1999 90099 034 ***150.00



Principal Place of Business 2a Mailing Address 59-2879314 Nature 59-2879314	14815 ELMONT AVE SPRING HILL FL 34610			14815 ELMONT AVE SPRING HILL FL 34610				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/20/1988					
Suite, Apt. #, etc.	2. Pri	incipal Pla	ace of Business	2a. Mailing Address						App	ied For		
Suite. Apt. #, etc. 22 27 27 5. Certificate of Status Desired \$8.75 Additional Fee Required \$6. Election Campaign Financing \$5.00 May Report \$7.00 May	-, '			26				59-2879314					
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Zip	Cit	ty & State						1 11 1					
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GIGUERE, CHANTAL 14815 ELMONT AVE SPRING HILL, FL 34610 83 84 City FL 85 Zip Code 81. Parasant to the provisions of Sections 507 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registored agent, or both, in the State of Florida. Such change was authorized by the corporation's board officerors. I hereby accept the appointment as registered officer or registored 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 officer or registored agent and the registered agent and							10. Name and Address of New Registered Agent						
14815 ELMONT AVE SPRING HILL, FL 34610 82 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 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, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, flyad or printed name of registered agent and title if applicable. [NOTE Registered Agent alphature required when rentations] DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DP GIGUERE, ARMAND 12.NME 12.NME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DVP GIGUERE, ARMAND 14. TITLE DVP GIGUERE, DOMINIOUE STREET ADDRESS GISUERE, DAVID TITLE GIGUERE, PHILLIPPE 32.4 CITY -ST - ZP TITLE GIGUERE, PHILLIPPE 32.4 CITY - ST - ZP TITLE GIGUERE, DAVID Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE Change Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DVP Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DVP Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND IN 12 ADDITIONS/CHANGES TO OFFICERS AND IN 12 ADDITIONS/CHANGES TO OFF	or itemio and the control of an inches						81 Name						
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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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)