File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY 🔏 Katherine Harris ANNUAL REPORT Secretary of State
DIVISION OF CORPORATIONS 1999 99 SEP -7 PH 1: 45 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee S 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE **DOCUMENT # L98000000302** 1a. Principal Place of Business Address CORRUPAL, L.C. 1222 N.E. 4th AVENUE FORT LAUDERDALE, FL33004 3. Date Organized or Qualified | 3a. State of Formation 2a. Mailing Address 2 Principal Place of Business 1222 N.E. 4th AVENUE 3/11/98 SAME FLORIDA Suite Apt # etc Suite Apt #, etc. 4. FEI Number Applied For City & State City & State 65-0813341 Not Applicable FT-LAUDERDALE, FL 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 33304 USA 33304 USA 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office MARC LABOSSIERE Street Address (P.O. Box Number is Not Acceptable) 1222 N.E. 4th AVENUE Suite, Apt. #. etc. Zıp Code FT LAUDERDALE 33304 9. Pursuant to the provisions of Sections 608 416 and 608 508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing disregistered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. DATE 8/23/99 MARC LABOSSIERE SIGNATURE City, State and Zip Code 10. Title Managing Members/Managers Business Street Address PRES YVAN QUIRION 66 VEILLETTE STREET ST CONSTANT, QUEBEC JOL 1G0 7000028:85507-- \$ -09/17/93--01037--011 ****588,75 ****588,75 11. Librare by certify that the information supplied with this filing do included on this annual report is true and accurate and that my sig not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information at the spall have the same legal effect as if made under oath; that I am a managing member or manager of the I restend hability company or the receiver or trustee empowered to e cute this report as required by Chapter 608. Florida Statutes; and that my name appears in Block 10, or on an attachment with an address SIGNATURE: YVAN QUIRION

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