

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007358

**FILED**  
**Mar 20, 2015**  
**Secretary of State**  
**CC3173197297**

**Entity Name:** FONDATION MOULIN SUR MER INC.

**Current Principal Place of Business:**

18659 SW 12TH STREET  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

18659 SW 12TH STREET  
PEMBROKE PINES, FL 33029 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SALIBA, PIERRE A  
1201 BRICKELL AVE.  
SUITE 610  
MIAMI, FL 33131 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name FOMBRUN, CHARLES E  
Address 7966 NW 14TH STREET  
City-State-Zip: MIAMI FL 33126

Title VP  
Name CARVONIS, DOMINIQUE F  
Address 7966 NW 14TH STREET  
City-State-Zip: MIAMI FL 33126

Title TRE  
Name SALIBA, PIERRE A  
Address 18659 SW 12TH STREET  
City-State-Zip: PEMBROKE PINES FL 33029

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHARLES FOMBRUN

)PRESIDENT

03/20/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date