FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 409157

(5)

LONGCHAMP INVESTMENT CO., INC.

Mailing Address

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FILED

Feb 18 1998 8:00am

Secretary of State

SUITE 500 SUITE 500		153 E PALMETTO PARK SUITE 500 BOCA RATON FL 33432	-		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1972		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		59-1425026	Not Applicable		
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		·		\$8.75 Additional	
22 27					5. Certificate of Status Desired	Fee Required	
City & State	е	City & State			6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Zip Country Zip Country			Trust Fund Contribution	Added to Fees		
24		 η ·	Country 8. This corporation owes or has paid the corrent year Intangible				
24 25 29 30 30 9, Name and Address of Current Registered Agent			130]	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
		Trogratorou Agoin	81	Name	10, Hame and Address of New Registerer	a waant	
LONGCHAMP, GARY			Name				
8210 HAMPTONWOOD DR. BOCA RATON, FL		82	Street Add	dress (P.O. Box Number is Not Acceptable)			
334			83				
			84	City	F	85 Zip Code	
11. Pursuant to office or reagent. I as	o the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	and 607.1508, Florida Statut of Florida. Such change was a ions of, Section 607.0505, Flo	les, the abov authorized b orida Statute	e-named cor y the corpora s.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap		
SIGNATURE							
	Signature, typed or printed name of registured agent OFFICERS AND			ent signature requ	ured when re-instating) DATE		
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
NAME	LONGCHAMP, GARY	L Detter	1.2 NAME			Change C Audition	
STREET ADDRESS	8210 HAMPTONWOOD DR.			4000000			
CITY-ST-ZIP	BOCA RATON, FL 00000		1.3 STREET				
TITLE	TS	DELETE	1.4 CHY - 5 2.1 TITLE	i 1 - ZIP		Change Addition	
NAME	LONGCHAMP, CLAUDE	Otter	2.2 NAME			Cuante C Modition	
STREET ADDRESS	8210 HAMPTONWOOD DR.		2.2 NAME 2.3 STREET	*ODDECC			
CITY-ST-ZIP	BOCA RATON FL		2.4 City-:				
TITLE	BOOK INTOITE	DELETE	31 THILE	51-ZIP		Change Addition	
NAME			3.2 NAME			E Manigo	
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-5				
TITLE		DELETE	4.1 TITLE	31-211		Change Addition	
NAME			4. 2 NAME			LL CHANGE LA PAGE	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY - ST - ZIP			4.4 CITY-S				
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			53 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S				
TITLE		DELETE	6.1 TITLE	<u> </u>		Change Addition	
NAME		_	6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-7IP			CACITY C	1			

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 supplied end 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 in the receiver or trustor 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, of only in ittachment with an address.