

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 589417

1. Entity Name
BOUCHARD-VEILLEUX, INC.



Principal Place of Business
**1128 N.E. VICTORIA PARK ROAD
FT. LAUDERDALE, FL 33304**

Mailing Address
**1128 N.E. VICTORIA PARK ROAD
FT. LAUDERDALE, FL 33304**



03132006 No Chg P CR2ED34 (11/05)

4. FEI Number
59-1918870

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**VEILLEUX, FRANCE B.
2440 NE 27 TER
FT. LAUDERDALE, FL 33305**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BOUCHARD, JASMIN
STREET ADDRESS	1114 NE VICTORIA PK
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	SD
NAME	VEILLEUX, FRANCE B.
STREET ADDRESS	6102 NW 45TH AVE
CITY-ST-ZIP	COCONUT CREEK, FL
TITLE	SD
NAME	VEILLEUX, FRANCE B.
STREET ADDRESS	1128 N.E. VICTORIA PARK
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/31/06-80025-014 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Fr. B. Veilleux
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/06
Date

Daytime Phone #