

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # 744775

1. Entity Name

MAISON DE MER, INC.



Principal Place of Business

545 ORTON AVE # 1
FORT LAUDERDALE FL 33304

Mailing Address

1721 N VICTORIA PARK RD
FORT LAUDERDALE FL 33-3205



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JACKLICH, LANCE
1721 N VICTORIA PARK RD
FORT LAUDERDALE FL 33305

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature of registered agent and officer, if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME JACKLICH, LANCE
STREET ADDRESS 1721 N VICTORIA PARK RD
CITY- ST- ZIP FORT LAUDERDALE FL 33305

☐ Delete

TITLE SD
NAME JACKLICH, SHANNON
STREET ADDRESS 1721 N VICTORIA PARK RD
CITY- ST- ZIP FORT LAUDERDALE FL 33305

☐ Delete

TITLE VD
NAME PELCHAT, REMI
STREET ADDRESS 545 ORTON AVENUE #1
CITY- ST- ZIP FT LAUDERDALE FL 33304

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
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CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Add

U00000422529
02/17/06-80021-001 61.25

☐ Change ☐ Add

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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

Lance Jacklich

1/30/06

\$954.835-5