FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL -6 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 847745 (7)

1. Corporation Name
CITADELLE INC.

Principal Place of Business	Mailing Address
C/O SEYMOUR A. GORDON 153 CENTRAL AVENUE ST. PETERSBURG FL 33731	C/O SEYMOUR A. GORDON 153 CENTRAL AVENUE ST. PETERSBURG FL 33731

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/18/1980
3a. Date of Last Report: 04/07/1994

2. Principal Place of Business	2b. Mailing Address
21 699 First Avenue North	26 P.O. Box 265
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: St. Petersburg, Florida	28 City & State: St. Petersburg, Florida
24 Zip: 33701 / 25 Country: USA	29 Zip: 33731 / 30 Country: USA

4. FEI Number: 59-2076988 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GORDON, SEYMOUR A.
~~153 CENTRAL AVENUE~~
~~ST. PETERSBURG FL 33731~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 699 First Avenue North
83
84 City: St. Petersburg FL 85 Zip Code: 33701

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ NOTE: Registered Agent signature required when reinstating. DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	STD	11 TITLE	☐ Change ☐ Addition
NAME	BREGY, OSWALD	12 NAME	800001533988
STREET ADDRESS	36,RUE DE CANDOLLE	13 STREET ADDRESS	-07/10/95--01088--022
CITY-ST-ZIP	GENEVA, SWITZERLAND	14 CITY-ST-ZIP	****225.00 ****225.00
TITLE	PD	21 TITLE	☐ Change ☐ Addition
NAME	MUDRY, FRANCOIS	22 NAME	
STREET ADDRESS	36,RUE DE CANDOLLE	23 STREET ADDRESS	
CITY-ST-ZIP	GENEVA, SWITZERLAND	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 supplemental 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 or the receiver or trustee 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, or on an attachment with an address.

SIGNATURE: (1) (Oswald BREGY) 6/15/95
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR MANAGING OFFICER OR DIRECTOR — Date — Daytime Phone #

OSWALD BREGY

0305065 CP