


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 11, 2005 08:00 AM
Secretary of State

DOCUMENT # F02000005523 1. Entity Name LUCIEN PICCARD INC.	
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Principal Place of Business 1203 NW 65TH PLACE FORT LAUDERDALE, FL 33309	Mailing Address 1203 NW 65TH PLACE FORT LAUDERDALE, FL 33309
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DO NOT WRITE IN THIS SPACE

05022005 No Chg-P CR2E034 (10/03)

4. FEI Number 11-3614273	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

KAMPI, JOHN A
4868 FOX HUNT TRAIL
BOCA RATON, FL 33487

**DO NOT WRITE
IN THIS SPACE**

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 signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRIEDMAN, SOL 1203 NW 65TH PLACE FORT LAUDERDALE, FL 33309
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110000365122
05/11/05-80027-005 150.00

12. 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 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: Sol Friedman Chairman 5/6/05 974 984 8114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #