

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90006 032 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # F11038	
1. Entity Name VIAEUR BOULANGER, INC.	
Principal Place of Business 8842 ROYAL PALM BLVD- CORAL SPRINGS FL 33065	Mailing Address 610 EAST-TAX 113 N FEDERAL HWY DANIA BEACH FL 33004 US
2. Principal Place of Business 10496 N.W. 50TH STREET Suite, Apt. #, etc.	3. Mailing Address 10496 N.W. 50TH STREET Suite, Apt. #, etc.
City & State SUNRISE, FL. Zip 33351	City & State SUNRISE, FL. Zip 33351
4. FEI Number 59-2053879	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ADAMS, GERALD 113 NORTH FEDERAL HIGHWAY DANIA BEACH FL 33004	
7. Name and Address of New Registered Agent Name DOMINIC BOULANGER Street Address (P.O. Box Number is Not Acceptable) 10496 N.W. 50TH STREET City SUNRISE FL Zip Code 33351	
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. SIGNATURE DOMINIC BOULANGER - REG. AGENT DATE 4-29-02 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/> FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS	
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete PD BOULANGER, VIAEUR 113 NORTH FEDERAL HIGHWAY DANIA FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete ADAMS, GERALD 113 N FEDERAL HWY DANIA BEACH FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP DOMINIC BOULANGER 10496 N.W. 50TH STREET SUNRISE, FL. 33351
13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: DOMINIC BOULANGER - VICE PRESIDENT DATE 4-29-02 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	

CR2E034 (9/01)