

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Aug 19 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000005117 (3)

1. Corporation Name  
SOCIETE DE GESTION GUILBAULT LTEE.



Principal Place of Business 22 CIRCLE RD POINTE-CLAIRE, QUEBEC H9R1X1 QC	Mailing Address 22 CIRCLE RD POINTE-CLAIRE, QUEBEC H9R1X1 QC
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 13000 GULF BLVD. Suite, Apt. #, etc. 22 309 City & State 23 MADEIRA BEACH FLORIDA Zip 24 33708 Country 25 U.S.A.		2a. Mailing Address 26 22 CIRCLE ROAD Suite, Apt. #, etc. 27 City & State 28 POINTE-CLAIRE, QUEBEC Zip 29 H9R1X1 Country 30 CANADA		3. Date Incorporated or Qualified 10/01/1997
				4. FEI Number 52-2108980 Applied For Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent DIROCCO, DOMBROW & ASSOCIATES, P.A. 6610 N. UNIVERSITY DR, SUITE 220 TAMARAC FL 33321		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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	PSD	1.1 TITLE	
NAME	GUILBAULT, PAUL	1.2 NAME	
STREET ADDRESS	22 CIRCLE RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	POINTE-CLAIRE, QUEBEC H9R1X1	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: Paul Guilbault 13-01-98 514-697-2353

CR2E034 (10/97)