

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J07717

(8)

1. Corporation Name

LA FLAIRE INC.

Principal Place of Business

3667 LAKE WORTH RD
106
LAKE WORTH FL 33462
US

Mailing Address

3667 LAKE WORTH RD
106
LAKE WORTH FL 33462
US



2. Principal Place of Business

2a. Mailing Address

21 6351 LAKE WORTH RD #224

27 Suite, Apt. #, etc.

22 LAKE WORTH, FLORIDA

28 City & State

23 33463

29 Zip

24 County EEVV

30 County

3. Date Incorporated or Qualified

04/04/1986

3a. Date of Last Report

03/09/1995

4. FFI Number

52-1440623

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

RIMEDIO, HAIDEE
3013 30TH LANE
LAKE WORTH FL 33463

10. Name and Address of New Registered Agent

81 Name

HAIDEE RIMEDIO

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

4780 SHERWOOD FOREST BLVD.

83 City

GREENACRES CITY

84 State

FL

85 Zip Code

33463

11. Pursuant to the provisions of Sections 607.061 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 is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am further willing to accept the obligations of Sections 607.061 and 607.1508, Florida Statutes.

SIGNATURE

HAIDEE RIMEDIO

HAIDEE RIMEDIO

2-1-96

12. OFFICERS AND DIRECTORS

1. TITLE VD
2. NAME RIMEDIO, HAIDEE
3. STREET ADDRESS 1403 14TH LANE
4. CITY-STATE-ZIP LAKE WORTH FL
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. TITLE
14. NAME
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97. TITLE
98. NAME
99. STREET ADDRESS
100. CITY-STATE-ZIP

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. TITLE ☐ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE ☐ Change ☐ Addition
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96. CITY-STATE-ZIP
97. TITLE ☐ Change ☐ Addition
98. NAME
99. STREET ADDRESS
100. CITY-STATE-ZIP

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)(b), 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 in a statement with an address.

SIGNATURE:

HAIDEE RIMEDIO

HAIDEE RIMEDIO

2-1-96

407-641-5761

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Print

last four digits

CR2E034 (12/95)