

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J16425 (7)

1. Corporation Name

MON PLAISIR TRADING CO., INC.



Principal Place of Business

% CORNELIS DEMILDT
1220 BENT OAK TRAIL
ALTAMONTE SPRINGS FL 32714

Mailing Address

% CORNELIS DEMILDT
1220 BENT OAK TRAIL
ALTAMONTE SPRINGS FL 32714

3. Date Incorporated or Qualified
05/27/1986

3a. Date of Last Report
03/03/1995

4. FEI Number

59-2681868

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEMILDT, CORNELIS
1220 BENT OAK TRAIL
ALTAMONTE SPRINGS FL 32714

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

P
NAME DEMILDT, CORNELIS
STREET ADDRESS 1220 BENT OAK TRAIL
CITY-ST-ZIP ALTAMONTE SPRGS FL 32714

TITLE ☐ DELETE

V
NAME DEMILDT, CORNELIA
STREET ADDRESS 1220 BENT OAK TRAIL
CITY-ST-ZIP ALTAMONTE SPRGS FL 32714

TITLE ☐ DELETE

S
NAME DEMILDT, JOHANNES C.R.K.
STREET ADDRESS 1900 SNOOK DRIVE
CITY-ST-ZIP DELTONA FL 32738

TITLE ☐ DELETE

T
NAME DEMILDT, CORNELIS
STREET ADDRESS 1220 BENT OAK TRAIL
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

4/26/96 407-299-6644

Extending Phone #

CR2E034 (12/95)