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FILED
May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J78794 (1)

1. Corporation Name
LA PRAIRIE CORP.

Principal Place of Business
1275 SO. PATRICK DR.
UNIT D
SATELLITE BEACH FL 32937

Mailing Address
PO BOX 410186
MELBOURNE FL 32941-0186
US



2. Principal Place of Business
21 415 PINEDA COURT

2a. Mailing Address
26 SAME

Suite, Apt. #, etc.
22 SUITE A

Suite, Apt. #, etc.

City & State
23 MELBOURNE FL

City & State

Zip
24 32940

Country
25 USA

Zip
29

Country
30

3. Date Incorporated or Qualified
06/18/1987

3a. Date of Last Report
03/12/1996

4. FEI Number
59-2840434

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

CLERC JEAN-YVES
1275 SO. PATRICK DR.
UNIT D
SATELLITE BEACH FL 32937

10. Name and Address of New Registered Agent

81 Name CHRISTOPHER J. COLEMAN, ESQ
82 Street Address (P.O. Box Number is Not Acceptable)
1800 W. HIBISCUS BLVD.
83 SUITE 138
84 City MELBOURNE FL 85 Zip Code 32941

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)

4/27/97

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME CLERC, JEAN-YVES
STREET ADDRESS 1275 SO. PATRICK DR.
CITY-ST-ZIP SATELLITE BEACH FL 32937

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME CLERC, JEAN-YVES
1.3 STREET ADDRESS 415 PINEDA COURT, SUITE A
1.4 CITY-ST-ZIP MELBOURNE, FL 32940

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

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0110386

CR2E034 (9/96)