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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

		# J9897' LE HOME, INC.	7 (8)							
Principal Place of Business Mailing Address							- I IODAHAR DITO IDIDI ARAD FOLTA IODAL CODI	OLDK OLDK	H DINIK AFARI DINI	AL BELOLD AND C
7980 CANTERBURY LANE			7960 CANTERBURY LANE							
PLANTATION FL \$3324-1968			PLANTATION FL 33324-1998							
							DO NOT WRITE	IN THIS	SPACE	
							3. Date Incorporated or Qualified			
<u></u>						10/22/1987				
2. Pri	ncipal Place of Bus	iness	2a. Mailing Address			4. FEI Number		Ar	oplied For	
21			26				65-0127659		No.	ot Applicable
Sui	ite, Apt. #, etc.		Suite, Apt. #, etc.	——————————————————————————————————————			5. Certificate of Status Desired		\$8.75	
22			27			S. SS Mindale S. States Egener		Fee Re	∍quired	
_	y & State		City & State	 			6. Election Campaign Financing	_	\$5.00	May Be
23			28			Trust Fund Contribution		Added 1	to Fees	
Zip)			├ ─┐	Country		8. This corporation owes or has paid			
24	252930						Personal Property Tax due June 3			∑ No
		and Address of Curre	nt Registered Agent		<u></u>	<u> </u>	10. Name and Address of New Reg	istered	Agent	
VIEL, GILLES 7960 CANTERBURY LANE #203				į.	31	Name	Address (P.O. Box Number is Not Acceptable)			
				[8	12	Street Addre				
				Ĺ						
PLANTATION FL 33324] ·	13					
					14	City			85 Zip (Code
								<u>FL</u>	<u>- </u>	
aç	gent. I am familiar w ATURE	gont, or both, in the State with, and accept the oblig	gations of, Section 607.0505	atutes, the abc ras authorized , Florida Statut (NOTE: Registered	les.		oration submits this statement for the puon's board of directors. I hereby accept	the app	pointment as	registered
12.	organitate, 1550		ID DIRECTORS	13.	19.5	organization radicate	ADDITIONS/CHANGES TO OFFICE		D DIRECTOR	RS IN 12
TITLE	DPS		DELETE	1.1 TITE	 E		7.5577107107071111020 70 017102		Change	Addition
NAME	MEL VIEL, GILLES 7960 CANTERBURY LANE PLANTATION FL			1	2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP					
				8						
TITLE	-20		DELETE	2.1 TITU					Change	Addition
NAME				2.2 NAM		Ì				
	ADDRESS			2.3 STRI		nneree i				
				2.4 CITY						
TITLE	Y-ST-ZIP		DELETE		3.1 TITLE			·	Change	Addition
NAME				1	3.2 NAME					
	ADDRESS			3.3 STRE		ODBECC				ļ
	_									
TITLE	Y-ST-ZIP F		DELETE		3.4. CITY-ST-ZIP 4.1 TITLE				Change	Addition
NAME					4. 2 NAME				change	
	anno con					DODECO				
STREET				4.3 STRE						
CITY-ST	-7IP		DELETE	4.4 CITY		ZIP			Change	Addition
TITLE	1		∟ DILLETE	5.1 TITLE		Ì				AUGIOON
NAME				5.2 NAM		DDDC00				
	ADDRESS			5.3 STRE						
CITY-ST	-ZIP		DELETE	5.4 CiTY		ZIP			Change	Addition
TITLE	1		[] DELETE	6.1 TITLE					Change	Addition
NAME				6.2 NAM						
STREET	1			6.3 STREET ADDRESS						
CITY-ST	- ZIP			6.4 CITY	-51-2	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 changes, of on an attackment with an address.

El Outlie 1

FILED

Feb 04 1998 8:00am

Secretary of State