

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 # **K41932** (0)

1. Corporation Name

SEA BIRD APARTMENTS, INC.



Principal Place of Business

Mailing Address

**C/O MARIETTE YANIRE
3225 N.E. 6TH ST
POMPANO BEACH FL 33062**

**C/O MARIETTE YANIRE
3225 N.E. 6TH ST
POMPANO BEACH FL 33062**

3. Date Incorporated or Qualified
10/28/1988

3a. Date of Last Report
04/26/1995

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

28 Zip Country

4. FEI Number

65-0080854

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

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**YANIRE, MARIETTE
3225 N.E. 6TH ST.
POMPANO BEACH FL**

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

TITLE **DP** ☐ DELETE
NAME **YANIRE, MARIETTE**
STREET ADDRESS **3225 NE 6TH ST. #10**
CITY-ST-ZIP **POMPANO BEACH FL**

TITLE **DVP** ☐ DELETE
NAME **YANIRE, JEAN**
STREET ADDRESS **6611 FRANCOIS-BOVIN**
CITY-ST-ZIP **MONTREAL, QUE. CANADA**

TITLE **DGT** ☒ DELETE
NAME **DUBE, JULES**
STREET ADDRESS **3225 NE 6TH ST #0**
CITY-ST-ZIP **POMPANO BEACH FL**

TITLE **D** ☐ DELETE
NAME **SUZOR, VIOLETT**
STREET ADDRESS **1800 - 8TH ST**
CITY-ST-ZIP **GRAND-MERE, QUE. CAN**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

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

DST ☒ Change ☐ Addition
Marcel Pilotte,
65 Chemin des Patriotes,
St-Charles sur Richelieu, Que. Canada J0H 2G0
D ☒ Change ☐ Addition
Antonia Lenage,
65 Chemin des Patriotes,
St-Charles sur Richelieu, Que. Canada J0H 2G0

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)(k), 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: **Mariette Yanire, Pres.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 11th, 1996

(954) 786-8657

Date

Daytime Phone #

CR2E034 (12/95)