

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # K49055 (2)

1. Corporation Name

PARK LAKE FRENCH TELEVISION INC.



Principal Place of Business  
C/O RINA ~~LEONOR~~ BENOIT  
303 LAKE SHORE DR.  
PEMBROKE PARK FL 33009

Mailing Address  
MARTEL  
C/O RINA ~~LEONOR~~ BENOIT  
303 LAKE SHORE DR.  
PEMBROKE PARK FL 33009

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified  
11/29/1988

3a. Date of Last Report  
04/17/1995

4. FEI Number

NOT APPLICABLE

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. 190.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~LEONOR~~ BENOIT, RINA MARTEL  
303 LAKE SHORE DR.  
PEMBROKE PARK FL 33009

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's signature is required when completing)

(DATE)

April 1st 1996

12. OFFICERS AND DIRECTORS

TITLE DT ☐ DELETE  
NAME O'NEIL, EDMUND  
STREET ADDRESS 132 MARINE COURT  
CITY-ST-ZIP PEMBROKE PARK FL

TITLE DV ☐ DELETE  
NAME LEO NOEL  
STREET ADDRESS 317 LAKE SHORE DR  
CITY-ST-ZIP PEMBROKE PARK FL

TITLE DS ☐ DELETE  
NAME ~~X~~ ~~LEONOR~~ BENOIT, RINA MARTEL  
STREET ADDRESS 303 LAKE SHORE DR.  
CITY-ST-ZIP PEMBROKE PARK FL

TITLE DP ☐ DELETE  
NAME CAMILLE D BOVIN  
STREET ADDRESS 122 N LAKE SHORE DR  
CITY-ST-ZIP PEMBROKE PARK FL

TITLE D ☐ DELETE  
NAME BELANGER, GUY  
STREET ADDRESS 113 NORTH LAKE SHORE DRIVE  
CITY-ST-ZIP PEMBROKE PARK FL 33009

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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

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Change

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Addition

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Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rina Martel Benoit, sec. April 1st 1996

(954) 981-0865

CR2E034 (12/95)

4-14-96