

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

APPROVED  
AND  
FILED

(1)

02/15/98

99 AUG 20 AM 11:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K49055

1. Corporation Name  
PARK LAKE FRENCH TELEVISION INC.

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

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
11/29/1988

4. FEI Number  
65-0238708

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 owes the current year Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name  
FERNAND LAMOTHE

82 Street Address (P.O. Box Number is Not Acceptable)  
721 SE 17th STREET

83

84 City  
FORT LAUDERDALE FL

85 Zip Code  
33316

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]*

(NOTE: Registered Agent signature required when reinstating)

DATE

08-10-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'NEIL, EDMUND	1.2 NAME	
STREET ADDRESS	132 MARINE COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PARK FL	1.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEO NOEL	2.2 NAME	
STREET ADDRESS	317 LAKE SHORE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PARK FL	2.4 CITY-ST-ZIP	
TITLE	DS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENOIT, RINA MARTEL	3.2 NAME	
STREET ADDRESS	303 LAKE SHORE DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PARK FL	3.4 CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAMILLE D BOVIN	4.2 NAME	
STREET ADDRESS	122 N LAKE SHORE DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PARK FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELANGER, GUY	5.2 NAME	
STREET ADDRESS	113 NORTH LAKE SHORE DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PARK FL 33009	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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-08/31/99--01042--001  
\*\*\*\*\*150.00 \*\*\*\*\*150.00

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 changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*

JULY 23/1999

Date

Daytime Phone #

CR2E034 (5/98)

**Lamothe  
Bergeron**

Comptables agréés  
Chartered Accountants  
Société nominale

Fernand Lamothe, CA  
Luc Bergeron, CA

Line Raza, CGA  
Marie-Hélène Lambert  
CGA

FLORIDE (U.S.A.)  
721 SE, 17th Street, #200  
Fort Lauderdale (Florida) 33316  
Tel: (954) 768-9548  
Fax: (954) 768-9775

QUÉBEC (CAN.)  
2060, de la Montagne  
6<sup>ème</sup> étage  
Montréal (Québec) H3G 1Z7  
Tél: (514) 499-0203  
Télec.: (514) 499-0265

40, de la Montagne  
Ste-Anne des Lacs (Québec)  
J0R 1B0  
Tél: (514) 865-0673

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Fort Lauderdale, July 10, 1999

Florida Department of State  
Annual Reports Filings  
Division of Corporations  
P.O.Box 6327  
Tallahassee, FL 32314

Re: Park Lake French T.V. Inc.  
Document # K49055

Object: Annual Report

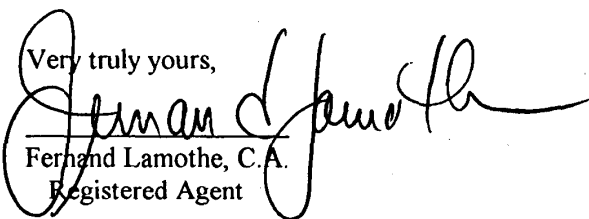
Dear Sir or Madam:

Since the creation of the Corporation in November 29, 1988, the Annual reports have been filed in time year after year. Unfortunately, this year 1999 reveals the exception to the rule because, due to administrative changes within the Corporation, nobody remembers to whom this report went or what to do with it. I must warn you, without any discriminatory intent, that this Corporation is run by elderly people, and some elderly persons have a tendency to forget things very often.

So, due to the above circumstances, I am asking you to waive the late filing fee by accepting my check in the amount of \$150 for the annual report 1999.

I appreciate your collaboration.

Very truly yours,

  
Fernand Lamothe, C.A.  
Registered Agent

