2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005
Secretary of State

DOCUMENT# K49055

Entity Name: PARK LAKE FRENCH TELEVISION INC.

Current Principal Place of Business:

111 W LIGHTHOUSE CT
PEMBROKE PARK, FL 33009

New Principal Place of Business:

Current Mailing Address:

111 W LIGHTHOUSE CT
PEMBROKE PARK, FL 33009

New Mailing Address:

FEI Number: 65-0238708 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTEL BENOIT, RINA
111 W LIGHTHOUSE CT
PEMBROKE PARK, FL 33009 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DT ( ) Delete
Name: LEVASSEUR, PHILIP
Address: 120 MARINE CIRCLE
City-St-Zip: PEMBROKE PARK, FL 33009

Title: DV ( ) Delete
Name: NOEL, LEO
Address: 317 LAKE SHORE DR
City-St-Zip: PEMBROKE PARK, FL 33009

Title: DS ( ) Delete
Name: BENOIT, RINA MARTEL,
Address: 111 WEST LIGHTHOUSE COURT
City-St-Zip: PEMBROKE PARK, FL 33009

Title: DP ( ) Delete
Name: BOIVIN, CAMILE D
Address: 122 N LAKE SHORE DR
City-St-Zip: PEMBROKE PARK, FL 33009

Title: D ( ) Delete
Name: HUPPE', ROBERT
Address: 134 MARINE CT
City-St-Zip: PEMBROKE PARK, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP LEVASSEUR DT 01/25/2005

Electronic Signature of Signing Officer or Director — Date