

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED), MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **K77402**

(1)

1. Corporation Name

LUCERNE INVESTMENT CO., INC.

Principal Place of Business

**C/O LOUISE BAUR COTE
910 NORTH PALMWAY
LAKE WORTH FL 33480**

Mailing Address

**C/O LOUISE BAUR COTE
910 NORTH PALMWAY
LAKE WORTH FL 33480**

FILED
Aug 11 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/04/1989

4. FEI Number

65-0183126

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 **4907 Boul Rosemont # 1**

Suite, Apt. #, etc.

27 **Montreal, Qué.**

City & State

28 **Canada**

Zip

29 **H1T 2E6**

Country

30

9. Name and Address of Current Registered Agent

**COTE, LOUISE BAUR
910 NORTH PALM WAY
LAKE WORTH FL 33480**

10. Name and Address of New Registered Agent

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 **D** ☐ DELETE
NAME **COTE, LOUISE BAUR**
STREET ADDRESS **910 NORTH PALMWAY**
CITY-ST-ZIP **LAKE WORTH FL**

TITLE **D** ☐ DELETE
NAME **COTE, ROGER**
STREET ADDRESS **910 NORTH PALMWAY**
CITY-ST-ZIP **LAKE WORTH FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 changed, or on an attachment with an address.

SIGNATURE: **Roger Cote**

1000002613609
-08/12/98-01015-034
*****158.75**

CR2E034 (5/98)

2

Montreal, July 13 1998

Florida Department Of State

Sandra B. Mortham
Secretary Of State
Division of Corporation

Mrs.

This letter is to inform you that we have not received the first notice and have the second notice around July 08 1998.

I am very frustated concerning this second notice.

Last ~~year~~ we had received the annual report packet and has been paid promptly.

I spoke with one of your employee this morning and she said to write a cheque for the amount of \$150.00 for this year.

I enclosed a cheque in the amount of \$158.75 that will cover for the annual report and certificate of status costs.

To make sure that not happen again, please change our mailing address to my holding Company at:

4907 Boul Rosemont # 1, Montreal, Quē. Canada, HIT 2E6.

Thank you for your understanding.

Your Truly


Roger Cote

Lucerne Investment Co. Inc. 910 North Palmway Lake Worth, Fla. 33460