

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 # L03852 (5)

1. Corporation Name

REU-DOM INVESTMENTS & HOLDINGS INC.



Principal Place of Business

1901 NW 18TH STREET
BUILDING B
POMPANO BEACH FL 33069-1611
US

Mailing Address

P.O. BOX 39588
FT LAUDERDALE FL 33339-9588
US

3. Date Incorporated or Qualified
07/24/1989

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 1207 S.W. 2nd STREET

Suite, Apt. #, etc.

22 City & State

23 POMPAÑO BEACH FLORIDA

24 33069-3209

Country

25 U.S.A.

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29 30

4. FEI Number
65-0400058

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

9. Name and Address of Current Registered Agent

REU-DOM & ASSOCIATES
3233 NE 34TH ST
#406
FT LAUDERDALE FL FL 33308

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 CP
NAME SHARE, REUBIN
STREET ADDRESS 3233 N.E. 34TH STREET #406
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE VS
NAME SHARE, DOMINIQUE
STREET ADDRESS 3233 N.E. 34TH STREET #406
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D
NAME TETREAU, PETER
STREET ADDRESS 442 MAIN RD.
CITY-ST-ZIP HUDSON, QUEBEC CANA

TITLE D
NAME ROSENZVEIG, DAVID
STREET ADDRESS 500 SHERBROOKE ST. WEST
CITY-ST-ZIP MONTREAL QUEBEC CANA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SANDRA B. MORTHAM, SECRETARY OF STATE

4/25/96

(954) 784-2739

Date

Daytime Phone #

CR2E034 (12/95)