2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # L36264 04 FEB 16 PH 4: 51 1. Entity Name V.F.-RENAISSANCE, INC. SECRETAR: OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address **BROAD & CASSEL BROAD & CASSEL** 7777 GLADES RD. STE. 300 7777 GLADES RD. STE. 300 BOCA RATON, FL 33434 BOCA RATON, FL 33434 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 65-0218275 Not Applicable Zip Country Zìp Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DEUTCH, JEFFREY A Street Address (P.O. Box Number is Not Acceptable) 7777 GLADES RD **STE 300** BOCA RATON, FL 33434 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE Defete TITLE ☐ Change ☐ Addition NAME POMERANTZ, ALICE NAME 100028961071 02/18/04--01005--001 **5000.00 STREET ADDRESS 8600 DECARIE BLVD, SUITE 200 STREET ADDRESS CITY-ST-ZIP TOWN OF MOUNT ROYAL H4P 2N2, QC CITY-ST-ZIP TVD TITLE ☐ Delete TITLE Change ☐ Addition GATTINGER, FRANKLIN J. 8600 DECARIE BLVD, SUITE 200 MOUNT ROYAL, QC, CANADA NAME GATTINGER, FRANKLIN J. NAME STREET ADDRESS 8600 DECARIE BLVD., SUITE 200 STREET ADDRESS CITY-ST-ZIP TOWN OF MOUNT ROYAL H4P 2N2, QC CITY-ST-ZIP ASD TITLE ☐ Defete TITLE K Change ☐ Addition NAME ESPOSITO, RALPH JR ESPOSITO, RAPHAEL Jr 8600 DECARIE BLVD, SUITE 200 NAME STREET ADDRESS 8600 DECARIE #200 STREET AODRESS CITY-ST-ZIP MT ROYAL, QC, CANADA, CITY-ST-ZIP MOUNT ROYAL, QC, CANADA THILE CEOD TITLE CEOSD ☐ Delete K Change ☐ Addition POMERANTZ, TERRY 8600 DECARIE BLVD, SUITE 200 NAME POMERANTZ, TERRY NAME STREET ADDRESS 8600 DECARIE #200 STREET ADDRESS MOUNT ROYAL, QC, CANADA CITY-ST-ZIP MT ROYAL, QC, CANADA, CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition POMERANTZ, TERRY NAME NAME STREET ADDRESS 8600 DECARIE #200 STREET ADDRESS CITY-ST-ZIP MT ROYAL, QC, CANADA, CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-782 12. 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 report or supplemental report is true and occurate 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 empowers of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address. SIGNATURE: R. Esposito SIGNATURE AND TEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR