FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # MO2905 (1) JACQUES AUGER DESIGN ASSOCIATES, INC.								
Pr	incipal Place	e of Busines		Mailing Address				T CODIODAL IN DURAN HARR CONTROL BRILL BURNE BURNE BURNE BURNE BURNE BURNE BURNE BURNE
	130 WASHIN			1130 WASHINGTO	M AVENUE			
	SIXTH FLOOR		Ut.	SIXTH FLOOR	M WACHOE			
MIAMI BEACH FL 33139					MIAMI BEACH FL 33139			DO NOT WRITE IN THIS SPACE
US				US				3. Date Incorporated or Qualified
								07/19/1984
_	· ·			} ₁	2a. Mailing Address			4. FEI Number Applied For
21	Outle And	[26]			Colle Ast A also			59-2440971 Not Applicable
<u></u>	Suite, Apt.	ite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired See Regulred Fee Regulred
22	City & State	27 City & State City & State						
23	Ony or State	•			· · · · ·			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	Zip		Country	28]	1 - Co			8. This corporation owes or has paid the current year Intangible
24	FP-		25	29	30	,		Personal Property Tax due June 30. Yes No
		9. Name		rrent Registered Agent				10. Name and Address of New Registered Agent
AUGER, CLAUDIA C. 38 S. HIBISCUS DRIVE MIAMI BEACH FL 33139						81 82 83 84		e it Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code
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 re- 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 reg- agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pointed name of registers agent and titled applicable. (NOTE Registered Agent's genature required when reinstating) DATE DATE								
12			OFFICERS	AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIT	LE	ST		DETI	ETE 1.1	JULLE		Change Addition
NAJ	ME		, JACQUES A.		1.2	NAME	ļ	
STF	REET ADDRESS		IBISCUS DRIVE		1.3	STREET	ADDRESS	, [
CIT	Y-ST-ZIP		BEACH FL			CITY - S	ST-ZIP	
TIT	LE	P		[] DELO	ETE 2.1	TITLE		Change Addition [
NAI	ME		, CLAUDIA C.		2.2	NAME		
STF	REET ADDRESS		IBISCUS DRIVE		2.3	STREET	ADDRESS	i
	Y-SI-ZIP	MIAMI E	BEACH FL				ST-ZIP	
1111	LE [DETE	- I	MLE	ļ	☐ Change ☐ Addition
NAI	ME					NAME		
STF	REET ADDRESS				3.3	STREET	ADDRESS	,
-	Y-ST-ZIP						S1-7IP	
TITI	1			Dere		TITLE		☐ Change ☐ Addition
NAI	ME				4. 2	NAME	,	
STF	reet address				4.3	STHEET	ADDRESS	i)
_	Y-ST-ZIP			<u></u>		CITY-S	31- ZIP	
TIT	LE			DELE		TITLE		Change Addition
NAI	ME				52	NAMÉ		
STF	REET ADDRESS				53	STREET	ADDRESS	,
CIT	Y-ST-ZIP					CITY-S	1 - 7IP	
ווו	le			☐ DELI	ETE 6.1	TITLE		☐ Change ☐ Addition
NA	ME				6.2	NAME	ı	
STF	REET ADDRESS				6.3	STRELT	ADDRESS	,

6.4 CHY- ST- ZIP

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida Statutes. I further certify that the information indicated on this annual report or experimental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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 chapted or only attachment with an address.

FILED

Apr 21 1998 8:00am

Secretary of State