## 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 # M80227

(5)

## FILED Feb 02 1998 8:00am Secretary of State

FRENC	H AFFAIR, INC.					
Principal Place of Business Mailing Address						e dibis midst dibit albis minst jabt
2637 MALL DR. 2637 MALL DR. SARASOTA FL 34231 SARASOTA FL 34231					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					05/10/1988	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		65-0047618	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	/ /	8. This corporation owes or has paid th	e current year Intangible
24	25	29 3	30		Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curre	ent Registered Agent		1	10. Name and Address of New Registe	ered Agent
	ns, alain		81	Name		
3970 BAYSHORE RD.			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)	·
SAI	ra <b>s</b> ota fl 34234		83			
			63			
			84	City		FL 85 Zip Code
44 Durawant	to the provisions of Sections 607.06	ing and 607 1609. Florida Clatutor	the show	a pamed co		
office or r	egistered agent, or both, in the Sta	te of Florida. Such change was au	thorized b	y the corpor	orporation submits this statement for the purporation's board of directors. I hereby accept the	appointment as registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Flor	ida Statute	S.		
SIGNATURE	Signature, typed or printed name of registered a	gent and title it applicable (NOTE:	Registered Ag	eni signature reg	guired when reinstating) Do	ATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	Ρ	DELETE	1.1 TITLE			Change Addition
NAME	MONS, ALAIN		1.2 NAME			
STREET ADDRESS	3970 BAYSHORE RD.		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34234		1.4 CITY-5	ST-ZIP		
TITLE	T	DELETE 2.1 T				☐ Change ☐ Addition
NAME	DORUS, ROSEMARY					
STREET ADDRESS			2.3 STREE	ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34239			ST-ZIP		Change Addition
TITLE			3.1 TITLE			Change Addition
NAME ATTEM ADDRESS			3.2 NAME	r appopres		
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP TITLE			3.4. CITY- 4.1 TITLE	31-41		Change Addition
NAME	1		4. 2 NAME			
STREET ADDRESS			4.3 STREE	4		
CITY-ST-ZIP			4.4 CITY-5			
TITLE		☐ DELE <b>TE</b>	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			5.4 CITY-5			
TITLE			6.1 TITLE			Change Addition
NAME	62		6.2 NAME	ł		
STREET ADDRESS			6.3 STREET	r address		
CITY-ST-ZIP			6.4 CITY-5			
4.4 I horobu c	artifu that the information cumplied	with this filing does not exalify for	the every	tion stated	in Section 119 07(3)(i) Florida Statutes, I furth	or cortify that the information.

14. I hereby certify that the information supplied with this filing does not challenged by 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 too 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 extra vertical terms are 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 indicate.

NOMATURE

1/08/08 941 925 341