

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90391 038 ***150.00

DOCUMENT # M88979

1. Entity Name
POMERLEAU GROUP U.S.A., INC.



Principal Place of Business

153 E. PALMETTO PK. RD.
#550
BOCA RATON, FL 33432

Mailing Address

215 N. EOLA DRIVE
ORLANDO, FL 32801

2. Principal Place of Business

433 Plaza Real

3. Mailing Address

Suite, Apt. #, etc.

Suite 275

Suite, Apt. #, etc.

City & State

Boca Raton, FLORIDA

City & State

Zip
33432

Country

Zip

Country

04192004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-0105834

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HOCTOR, JAMES J
215 NORTH EOLA DRIVE
ORLANDO, FL 32801

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
POMERLEAU, HERVE
5200 N. OCEAN BLVD #714
FT. LAUDERDALE, FL 33308 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
Pomerleau, Pierre
521 6th Street
St-Georges, QC, CANADA G5Y 5B7 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
Pomerleau, Pierre
521 6th Street
St-Georges, QC, CANADA G5Y 5B7 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Pierre Pomerleau, president 4/16/2004 418-228-6688

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #