2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000006698

FILED Jul 02, 2005 Secretary of State

Entity Name: VISION DES JEUNES DE COTE DE FER, INC.

Current Principal Place of Business:		New Principal Place of Business:		
780 SW 6 N. LAUDE	7TH AVE RDALE, FL 33068			
Current N	lailing Address:	New Mail	ing Address:	
780 SW 6 N. LAUDE	7TH AVE RDALE, FL 33068			
In accordar	nce with s. 607.193(2)(b), F.S., the corporation did not receive		ce.	
FAUGUE, 780 SW 6 NORTH L	d Address of Current Registered Agent: EWALD FORTH AVE. AUDERDALE, FL 33068 US E named entity submits this statement for the purpos		I Address of New Registered Agent: its registered office or registered agent, or both	
	e of Florida.	e or onlinging	no registered office of registered agent, or both,	
SIGNATU	RE:Electronic Signature of Registered Agent		 Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete FAUGUE, EWALD 780 SW 67 AVE NORTH LAUDERDALE, FL 33068	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete LAVAUD, REMY P 7409 SW 11TH CT N. LAUDERDALE, FL 33068	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () Delete ST FLEUR, ACEDA 3815 SW 16 STREET #4 FT LAUDERDALE, FL 33312	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ST -FLEUR, ACEDA 3815 SW 16 STREET #4 FT LAUDERDALE, FL 33312	
City-St-Zip:		Title:	COUN (X) Change () Addition	
Title: Name: Address:	ST () Delete NUCLASS, FLEUR 3815 SW 16TH STREET FORT LAUDERDALE, FL 33312	Name: Address: City-St-Zip:	SAINT-FLEUR, NUCLASS 3815 SW 16TH STREET FORT LAUDERDALE, FL 33312	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	NUCLASS, FLÉUR 3815 SW 16TH STREET	Name: Address:	3815 SW 16TH STREET	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EWALD FAUGUE PRES 07/02/2005