

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004567

FILED  
May 06, 2009  
Secretary of State

Entity Name: L'ABAPEC OF FLORIDA, INC.

**Current Principal Place of Business:**

13045 S W 104TH TERRACE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

13045 S W 104TH TERRACE  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 13-4211513      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LEGAGNEUR, GEORGE  
13045 S W 104TH TERRACE  
MIAMI, FL 33186      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD      ( ) Delete  
Name: METELLUS, GEORGE  
Address: 6193 N W 183 LN  
City-St-Zip: MIAMI, FL 33015

Title: D      ( ) Delete  
Name: LAURENT, FRESNEL  
Address: 498 N W 165 ST/RD  
City-St-Zip: NORTH MIAMI BEACH, FL 33165

Title: DT      ( ) Delete  
Name: LEGAGNEUR, GEORGE  
Address: 13045 S W 104TH TERRACE  
City-St-Zip: MIAMI, FL 33186

Title: SD      ( ) Delete  
Name: MARCELIN, GISLAINE M 86  
Address: 10145 S W 223RD TERRACE  
City-St-Zip: MIAMI, FL 33190

Title: D      ( ) Delete  
Name: REMY, CLAUDE  
Address: 2051 N E 154TH STREET  
City-St-Zip: MIAMI, FL 33162

Title: TD      (X) Delete  
Name: VALBRUN, PIERRE  
Address: 8601SW94ST APT 107W  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GEORGE LEGAGNEUR

DT

05/06/2009

Electronic Signature of Signing Officer or Director

Date