2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005
Secretary of State

DOCUMENT# N04000010291

Entity Name: LES SENTINELLES, INC.

Current Principal Place of Business:

324 PALMETTO RD
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

324 PALMETTO RD
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GERVELUS, IROSNET
12333 W 31ST ST
RIVIERA BEACH, FL 33404 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: P ( ) Delete
Name: JEAN, ISNEL
Address: 324 PALMETTO RD
City-St-Zip: LAKE PARK, FL 33403

Title: S ( ) Delete
Name: GERVELUS, IROSNET
Address: 1233 W 31ST ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VP ( ) Delete
Name: ALEXANDRE, MARIE S
Address: 4490 PORTPFINO WAY - # 207
City-St-Zip: LAKE PARK, FL 33403

Title: T ( ) Delete
Name: JEAN, ISEMENE
Address: 324 PALMETTO RD
City-St-Zip: LAKE PARK, FL 33403

Title: D ( ) Delete
Name: SAINTILMON, PAULINE
Address: 4627 ORLEANS CT - # A
City-St-Zip: W PALM BEACH, FL 33415

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 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: JEAN ISNEL P 04/19/2005

Electronic Signature of Signing Officer or Director Date