

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003393

FILED
Apr 29, 2009
Secretary of State

Entity Name: SAINT-LOUIS DEMAIN INC.

Current Principal Place of Business:

238 NW 121ST ST.
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

238 NW 121ST ST.
MIAMI, FL 33168

New Mailing Address:

FEI Number: 74-3171723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERRE, JEAN J
238 NW 121ST ST.
MIAMI, FL 33168 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: D () Delete
Name: JOSEPH, SMITH
Address: 13377 W. DIXIE HWY.
City-St-Zip: N. MIAMI, FL 33161

Title: V () Delete
Name: ATIS, MASSENET
Address: 20680 NE 4TH CT., APT. 104
City-St-Zip: MIAMI, FL 33179

Title: S () Delete
Name: PIERRE, JEAN J
Address: 238 NW 121ST ST.
City-St-Zip: MIAMI, FL 33168

Title: T () Delete
Name: MONESTIME, TOUSSAINT
Address: 666 NE 125TH ST.
City-St-Zip: N. MIAMI, FL 33161

Title: P () Delete
Name: FLEURIDOR, ROBERT E
Address: 5577 WILEY ST.
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: NESTOR, MARC A
Address: 3085 NE 163RD ST.
City-St-Zip: N. MIAMI BCH, FL 33162

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
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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: JEAN JOSEPH PIERRE

S

04/29/2009

Electronic Signature of Signing Officer or Director

Date