

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16953

FILED
Feb 09, 2007
Secretary of State

Entity Name: LES DIPLOMATES, INC.

Current Principal Place of Business:

C/O CLAUDETTE LAPIERRE
7800 W OAKLAND PK BLVD, BLDG G
SUNRISE, FL 33351 US

Current Mailing Address:

C/O CLAUDETTE LAPIERRE
7800 W OAKLAND PK BLVD, BLDG G
SUNRISE, FL 33351 US

New Principal Place of Business:

C/O LAUREN FITZBACK COUF
3428 N OCEAN BLVD
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

C/O LAUREN FITZBACK COUF
3428 N OCEAN BLVD
FORT LAUDERDALE, FL 33308 US

FEI Number: 59-2720896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUNDERMEIER, MARYSE
943 NW 53RD ST.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

LAUREN FITZBACK COUF
3428 N OCEAN BLVD
FORT LAUDERDALE, FL 33308 US

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: LAUREN FITZBACK COUF

02/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: LAPIERRE, CLAUDETTE, P.
Address: 7800 W OAKLAND PK BLVD, BLDG G
City-St-Zip: SUNRISE, FL 33351

Title: SD () Delete
Name: EDWARDS, MADELEINE D, UHAIME
Address: 16690 WATER EDGE DRIVE
City-St-Zip: WESTON, FL 33326

Title: PD () Delete
Name: DUBOIS COIL, CHRISTINE
Address: 456 SW 60TH AVENUE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: DIANE LEDOUX,
Address: 4281 NW 41ST STREET, APT 415
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: SD (X) Change () Addition
Name: PAULINE MORISSETTE,
Address: 2334 S CYPRESS BEND DRIVE, # 706
City-St-Zip: POMPAÑO BEACH, FL 33069

Title: PD (X) Change () Addition
Name: LAUREN FITZBACK COUF,
Address: 3428 N OCEAN BLVD
City-St-Zip: FORT LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the 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: LAUREN FITZBACK COUF

PD

02/09/2007

Electronic Signature of Signing Officer or Director

Date