

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16953

Entity Name: LES DIPLOMATES, INC.

FILED
Jan 05, 2009
Secretary of State

Current Principal Place of Business:

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

Current Mailing Address:

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

New Principal Place of Business:

C/O LAUREN FITZBACK COUF
325 JACARANDA DRIVE
PLANTATION, FL 33324 US

New Mailing Address:

C/O LAUREN FITZBACK COUF
325 JACARANDA DRIVE
PLANTATION, FL 33324 US

FEI Number: 59-2720896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

LAUREN FITZBACK COUF
325 JACARANDA DRIVE
PLANTATION, FL 33324 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

01/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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:

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: LAUREN FITZBACK COUF

PD

01/05/2009

Electronic Signature of Signing Officer or Director

Date