

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90257 015 \*\*\*\*61.25

**DOCUMENT # N92000000881**

1. Entity Name

**CLUB ENTENTE, INC.**



Principal Place of Business

%ERNEST BUISSETH  
9010 JOHNSON STREET  
PEMBROKE PINES FL 33024

Mailing Address

%ERNEST BUISSETH  
9010 JOHNSON STREET  
PEMBROKE PINES FL 33024



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0389999**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

**BUISSETH, ERNEST  
9010 JOHNSON STR  
PEMBROKE PINES FL 33024**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-designing)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete  
NAME VALCIN, MYRTHO  
STREET ADDRESS 8754 MIRAMAR BLVD  
CITY-ST-ZIP MIRAMAR FL 33023

TITLE SD ☒ Delete  
NAME DAGUILLARD, WILLIAM  
STREET ADDRESS 4350 HILLCREST DR., #607  
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE TD ☒ Delete  
NAME BEAUSEJOUR, GRACITA  
STREET ADDRESS 6516 EMERALD LAKE DR.  
CITY-ST-ZIP MIRAMAR FL 33023

TITLE VPD ☒ Delete  
NAME SOLIDE, JEAN  
STREET ADDRESS 9251 ASHLEY DR.  
CITY-ST-ZIP HOLLYWOOD FL 33025

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition  
NAME EDNER BODET  
STREET ADDRESS 8800 NW 5th ST  
CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE SD ☒ Change ☐ Addition  
NAME PHILIPPE SEYMOUR  
STREET ADDRESS MIRAMAR FL 33023

TITLE TD ☒ Change ☐ Addition  
NAME GOLDY SAINTILLIEN  
STREET ADDRESS 5233 SW 118th AVE  
CITY-ST-ZIP COOPER CITY, FL 33317

TITLE VPD ☒ Change ☐ Addition  
NAME DUCAMEL J BAROSY  
STREET ADDRESS 1121 NE 200 TERR  
CITY-ST-ZIP MIAMI FL 33179

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Edner Bodelt*

03/13/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #