2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002939

1. Entity Name

ALLIANCE FRANCAISE DES PALM BEACHES, INC.

FILED
May 22, 2000 8:00 am
Secretary of State
05-22-2000 90038 029 ****61.25

Principal Place of Business	Mailing Address
170 CHILEAN AENUE PALM BEACH FL 33480	PO BOX 2574 PALM BEACH FL 33480-2574 FL

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4411 Beacon Circle	4411 Beacon Circle
Suite, Apt. #, etc.: Suite 1A	Suite, Apt. #, etc.: Suite 1A
City & State: West Palm Beach FL	City & State: West Palm Beach FL
Zip: 33407 Country: US	Zip: 33407 Country: US

4. FEI Number: APPLIED FOR ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BRIAN, PHILIPPE
170 CHILEAN AENUE
PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name: Philippe J. Brian
Street Address (P.O. Box Number is Not Acceptable): 4411 Beacon Circle Suite 1A
City: West Palm Beach FL Zip Code: 33407

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.

SIGNATURE: Philippe J. Brian 04-29-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RIOGBY, ARLETTE 1720 OCEAN BOULEVARD MANALAPALH FL 33462	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HIRSH, NICOLE 2482 PLAYERS COURT W.PALM BEACH FL 33414	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRIAN, PHILIPPE 170 CHILEAN AVENUE PALM BEACH FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Philippe J. Brian Philippe J. Brian 04-29-00 (561) 835-1111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #