## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000026800

City-St-Zip:

Entity Name: BETTY J. COUILLARD, INC.

Apr 21, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 15311 NW 60 AVENUE SUITE 100 MIAMI LAKES, FL 33014 **New Mailing Address: Current Mailing Address:** 15311 NW 60 AVENUE SUITE 100 MIAMI LAKES, FL 33014 FEI Number: 65-0990462 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COUILLARD, BETTY J MS. 9841 NW 4TH ST PEMBROKE PINES, FL 33024 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PD () Delete Title: () Change () Addition COUILLARD, BETTY J Name: Name: 9841 4TH ST Address: Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: Title: ( ) Delete Title: ( ) Change (X) Addition LEON, NORA R Name: Name: Address: Address: 15311 NW 60 AVE, SUITE 100

City-St-Zip:

MIAMI LAKES, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETTY J. COUILLARD PD 04/21/2004