## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000058897

PEREZ, VERA SOPHIA

5985 BUENA VISTA CT

CANAL POINT, FL 33438

Name:

Address:

City-St-Zip:

FILED Feb 18, 2005 Secretary of State

Entity Name: LES TUILERIES INVESTMENTS INC. **Current Principal Place of Business: New Principal Place of Business:** 1000 SEMINOLE DRIVE FORT LAUDERDALE, FL 33304 **Current Mailing Address: New Mailing Address:** 1000 SEMINOLE DRIVE FORT LAUDERDALE, FL 33304 FEI Number: 52-2252546 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: TORCHIN, DAVID PEREZ, GERARD 8211 W BROWARD STE 200 1000 SÉMINOLE DRIVE US FORT LAUDERDALE, FL 33304 US FORT LAUDERDALE, FL 33324 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: GERARD PEREZ 02/18/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CABANETTES, CHRISTIAN Name: Name: 8999 SW 52ND ST Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33328 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: PEREZ. GERARD Name: 5985 BUENA VISTA CT Address: Address: BOCA RATON, FL 33433 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition AMARAL, ELISABETE Name: Name: 8999 SW 52ND ST Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33328 City-St-Zip: Title: () Delete Title: () Change () Addition

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

VΡ SIGNATURE: GERARD PEREZ 02/18/2005