2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2005
Secretary of State

DOCUMENT# P01000090447

Entity Name: DOMAINE DE ST. QUENTIN , INC.

Current Principal Place of Business:

35 NW 1ST ST
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

35 NW 1ST ST
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 94-3152913 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KNOWLES, YVONNE C
1697 N GOLDENEYE LANE
HOMESTEAD, FL 33035 US

Name and Address of New Registered Agent:

KNOWLES, YVONNE C
1697 NORTH GOLDENEYE LANE
HOMESTEAD, FL 33035 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: YVONNE C KNOWLES 07/01/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: KNOWLES, YVONNE C
Address: 1697 N. GOLDENEYE LANE
City-St-Zip: HOMESTEAD, FL 33035

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: KNOWLES, YVONNE C
Address: 1697 NORTH GOLDENEYE LANE
City-St-Zip: HOMESTEAD, FL 33035

Title: DVPT ( ) Change (X) Addition
Name: KNOWLES, HOMER W
Address: 1697 NORTH GOLDENEYE LANE
City-St-Zip: HOMESTEAD, FL 33035

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.

SIGNATURE: YVONNE C KNOWLES D 07/01/2005
Electronic Signature of Signing Officer or Director Date