

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092145

Entity Name: BONJOUR DE PARIS, INC.

FILED  
Jun 04, 2004  
Secretary of State

## Current Principal Place of Business:

212 S OLIVE AVENUE  
WEST PALM BEACH, FL 33401 US

## New Principal Place of Business:

## Current Mailing Address:

212 S OLIVE AVENUE  
WEST PALM BEACH, FL 33401 US

## New Mailing Address:

FEI Number: 42-1548398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AGAPI, CIPRIAN  
7480 GREENVILLE CIRCLE  
LAKE WORTH, FL 33467

## Name and Address of New Registered Agent:

KOTSIFOS, ANDREAS  
255 EVERNIA STREET  
908  
WEST PALM BEACH, FL 33401

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: ANDREAS KOTSIFOS

06/04/2004

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: PTD ( ) Delete  
Name: AGAPI, IRINA S  
Address: 7480 GREENVILLE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467

Title: SVD (X) Delete  
Name: AGAPI, CIPRIAN  
Address: 7480 GREENVILLE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: KOTSIFOS, ANDREAS  
Address: 255 EVERNIA #908  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANDREAS KOTSIFOS

PTD

06/04/2004

Electronic Signature of Signing Officer or Director

Date