## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P03000012737

1. Entity Name LE MAISON DECOR BY G. VIGUIE, INC.

FILED
Jan 10, 2005 08:00 AM
Secretary of State

Principal Place of Business

\_\_\_ Mailing Address

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10923 BLACKHAWK STREET PLANTATION, FL 33324

10923 BLACKHAWK STREET PLANTATION, FL 33324



01072005

No Chg-P

CR2E034 (10/03)

914.424.4051

4. FEI Number 57-1148823

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VIGUIE, GEESJI G 10923 BLACKHAWK STREET PLANTATION, FL 33324

**SIGNATURE:** 

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the p ions of registered agent.	urpose of changing its reg	distered office or re	egistered agent, or bol	th, In the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed nome of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD VIGUIE, GEESJI G 10923 BLACKHAWK STREET PLANTATION, FL 33324		· — - · ·		1100000177645 
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	IN <sup>-</sup>	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					-
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 607, 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.					