

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054047

Entity Name: LEOGANE MARKET, INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

601 W. ATLANTIC AVENUE
DELRAY BEACH, FL

New Principal Place of Business:

Current Mailing Address:

601 W. ATLANTIC AVENUE
DELRAY BEACH, FL

New Mailing Address:

601 W. ATLANTIC AVENUE
BOYNTON BEACH, FL 33436

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, SHERLENE D
5728 STRAWBERRY LAKES CIRCLE
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

LOUIMA, ALBERTE D
8204 WHITE ROCK CIRCLE
LAKE WORTH, FL 33463 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: ALBERTE D. LOUIMA

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FIGARO, JEROME
Address: 110 SW 6TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FIGARO, JEROME PRES.
Address: 110 SW 6TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

Title: MANA () Change (X) Addition
Name: LOUIMA, ALBERTE MANAGER
Address: 8204 WHITE ROCK CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436 US

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: ALBERTE LOUIMA

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date