

2004 FOR PROFIT CORPORATION ANNUAL REPORT

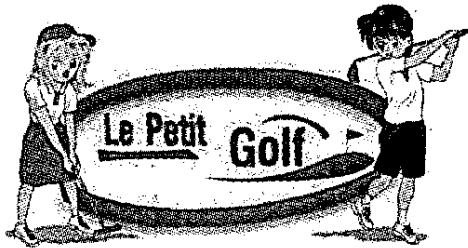
FILED
Jun 14, 2004 8:00 am
Secretary of State

06-14-2004 90003 003 ***150.00

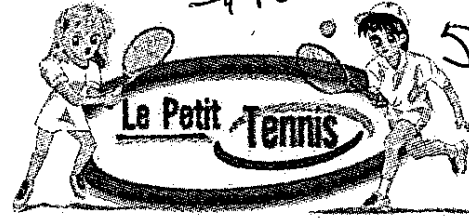
DOCUMENT # P03000099777 1. Entity Name LE PETIT GOLF, INC.																															
Principal Place of Business 3573 NW 4TH AVENUE BOCA RATON, FL 33431		Mailing Address 3573 NW 4TH AVENUE BOCA RATON, FL 33431																													
2. Principal Place of Business 102 NE 2ND STREET SUITE 356 BOCA RATON, FL 33432 USA		3. Mailing Address 102 NE 2ND STREET SUITE 356 BOCA RATON, FL 33432 USA																													
4. FEI Number 05-0586203		Applied For <input type="checkbox"/> Not Applicable																													
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6092004 Chg-P CR2E034 (10/03)																													
6. Name and Address of Current Registered Agent FLEURIAN, JEAN-PHILIPPE 3573 NW 4TH AVENUE BOCA RATON, FL 33431		7. Name and Address of New Registered Agent Name FLEURIAN, JEAN-PHILIPPE Street Address (P.O. Box Number is Not Acceptable) 102 NE 2ND STREET, SUITE 356 City BOCA RATON FL Zip Code 33432																													
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: JEAN-PHILIPPE FLEURIAN 6/10/04 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE)</small>																															
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> DPS FLEURIAN, JEAN-PHILIPPE 3573 NW 4TH AVENUE BOCA RATON, FL 33431 <input type="checkbox"/> Delete </td> </tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS FLEURIAN, JEAN-PHILIPPE 3573 NW 4TH AVENUE BOCA RATON, FL 33431 <input type="checkbox"/> Delete													11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> DPS JEAN-PHILIPPE FLEURIAN 102 NE 2ND STREET, SUITE 356 BOCA RATON, FL 33432 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS JEAN-PHILIPPE FLEURIAN 102 NE 2ND STREET, SUITE 356 BOCA RATON, FL 33432 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition												
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12. I hereby certify that the information supplied with this filing does not qualify 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 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.																															
SIGNATURE: JEAN-PHILIPPE FLEURIAN 6/10/04 561-750-8105 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # ext. 103</small>																															

54057348





attachment



#103000099777
54057348

June 10, 2004

Dear Sunbiz.org Representative:

I apologize for the lateness of these payments.
~~Unfortunately, we have changed address and we never~~
received any payment notices by mail. I would like to ask for
your understanding and hope that you will accept this
overdue payment without penalty.

Please feel free to contact me with any questions and thank
you for your time and consideration.

Sincerely yours,

Jean-Philippe Fleurian
President

Le Petit Tennis, Inc. and Le Petit Golf, Inc.
561-750-8105, ext. 103