

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029455

FILED
Apr 06, 2005
Secretary of State

Entity Name: L'OR VOYAGES INC.

Current Principal Place of Business:

2800 W OAKLAND PARK BLVD #107
OAKLAND PARK, FL 33311

New Principal Place of Business:

2800 W OAKLAND PARK BLVD
SUITE #107
OAKLAND PARK, FL 33311

Current Mailing Address:

2800 W OAKLAND PARK BLVD #107
OAKLAND PARK, FL 33311

New Mailing Address:

1 IMP DU HAUT CLOS RENAULT
APT 37
MENNECY, FRANCE, ES 91540

FEI Number: 20-0543824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALEXANDRE, DIXON
2800 W OAKLAND PARK BLVD #107
OAKLAND PARK, FL 33311 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: VIDAL, MONA
Address: 2 RUE DU RU 91540
City-St-Zip: MENNECY, FRANCE, OC

Title: DDS () Delete
Name: LOUIS-CHARLES, MARIE SOLANGE
Address: 10600 NW 2 CT
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VIDAL, MONA M
Address: 1 IMP DU HAUT CLOS RENAULT APT 37
City-St-Zip: MENNECY, FRANCE, ES 91540 OC

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: MONA M VIDAL

DP

04/06/2005

Electronic Signature of Signing Officer or Director

_____ Date