

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104976

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: CHOUCOUNE EXPORT AND IMPORT, INC

## Current Principal Place of Business:

751 NW 135TH WAY  
PLANTATION, FL 33325

## New Principal Place of Business:

5827 NW 125TH TERRACE  
CORAL SPRINGS, FL 33076

## Current Mailing Address:

751 NW 135TH WAY  
PLANTATION, FL 33325

## New Mailing Address:

5827 NW 125TH TERRACE  
CORAL SPRINGS, FL 33076

FEI Number: 57-1209183

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLEURIMONT, SERGE  
751 NW 135TH WAY  
PLANTATION, FL 33325 US

## Name and Address of New Registered Agent:

FLEURIMONT, SERGE  
5827 NW 125TH TERRACE  
CORAL SPRINGS, FL 33076 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:

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: FLEURIMONT, SERGE  
Address: 751 NW 135TH WAY  
City-St-Zip: PLANTATION, FL 33325

Title: DT ( ) Delete  
Name: BENJAMIN, CAROLINE  
Address: 751 NW 135TH WAY  
City-St-Zip: PLANTATION, FL 33325

Title: DS ( ) Delete  
Name: FLEURIMOND, NANCY  
Address: 751 NW 135TH WAY  
City-St-Zip: PLANTATION, FL 33325

Title: DV ( ) Delete  
Name: FLEURIMOND, EMILIEN  
Address: RUE DERENONCOURT #109  
City-St-Zip: PETION-VILLE, HAITI, FL 33325

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: FLEURIMONT, SERGE  
Address: 5827 NW 125TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DT (X) Change ( ) Addition  
Name: BENJAMIN, CAROLINE  
Address: 5827 NW 125TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DS (X) Change ( ) Addition  
Name: FLEURIMOND, NANCY  
Address: 5827 NW 125TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SERGE FLEURIMONT

PRES

04/06/2009

Electronic Signature of Signing Officer or Director

Date