## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000118514

Entity Name: L'UNION FAIT LA FORCE, INC

**FILED** Aug 04, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

4164 INVERARY DRIVE 4164 INVERARY DRIVE LAUDERHILL, FL 33319 **BUILDING 12 SUITE 304** LAUDERHILL, FL 33319

**Current Mailing Address:** New Mailing Address:

2614 NW 99TH AVENUE 4164 INVERARY DRIVE LAUDERHILL, FL 33319 **BUILDING 31** CORAL SPRINGS, FL 33065

FEI Number: 17-1497172 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAX-OLIVER, CARRE MAX-OLIVIER, CARRE 2614 NW 99TH AVE 2614 NW 99TH AVE CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33065 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: MAX-OLIVIER CARRE 08/04/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete Title: (X) Change ( ) Addition

MAX-OLIVER, CARRE Name: Name: MAX-OLIVIER, CARRE 2614 NE 99TH AVE 2614 NE 99TH AVE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

Title: Title: () Delete () Change () Addition

Name: MCDONNOUGH, KAREN I Name: 2614 NE 99TH AVE Address: Address: CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete () Change () Addition

PIERRE-ANTOINE, CAROLE Name: Name: 2614 NE 99TH AVE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 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: MAX-OLIVIER CARRE 08/04/2005 CEO