

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90005 046 ***150.00

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DOCUMENT # P16500

1. Corporation Name

MONTENAY INTERNATIONAL CORP.

Principal Place of Business

3225 AVIATION AVE
4TH FLOOR
MIAMI FL 33133-4741

Mailing Address

3225 AVIATION AVE
4TH FLOOR
MIAMI FL 33133-4741

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1987

4. FEI Number

13-3077212

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD.
1406 HAYS STREET, SUITE #2
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD ☒ DELETE
NAME DELIGNY, JEAN-LOUIS
STREET ADDRESS 3225 AVIATION AVE 4TH FLOOR
CITY-ST-ZIP MIAMI FL

TITLE PD ☐ DELETE
NAME GOURVENNEC, MICHEL
STREET ADDRESS 3225 AVIATION AVE 4TH FL
CITY-ST-ZIP MIAMI FL 33133

TITLE EVP ☐ DELETE
NAME PASSAGE, STEPHEN S.
STREET ADDRESS 3225 AVIATION AVE 4TH FL
CITY-ST-ZIP MIAMI FL 33133

TITLE D ☐ DELETE
NAME AVENAS, MICHEL
STREET ADDRESS 3225 AVIATION AVENUE 4TH FLOOR
CITY-ST-ZIP MIAMI FL 33133

TITLE EVP ☐ DELETE
NAME MORTON, THOMAS A. R.
STREET ADDRESS 3225 AVIATION AVENUE 4TH FLOOR
CITY-ST-ZIP MIAMI FL 33133

TITLE EVP ☒ DELETE
NAME PORTUONDO, JUAN M.
STREET ADDRESS 3225 AVIATION AVE 4TH FL
CITY-ST-ZIP MIAMI FL 33133

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME Jean-Louis Deligny
1.3 STREET ADDRESS 3225 Aviation Ave 4th FL
1.4 CITY-ST-ZIP Miami FL 33133

2.1 TITLE DC ☐ Change ☒ Addition
2.2 NAME Denis Gasquet
2.3 STREET ADDRESS 3225 Aviation Ave 4th FL
2.4 CITY-ST-ZIP Miami FL 33133

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME William Kriegel
3.3 STREET ADDRESS 3225 Aviation Ave 4th FL
3.4 CITY-ST-ZIP Miami FL 33133

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME Henri Proglgio
4.3 STREET ADDRESS 3225 Aviation Ave 4th FL
4.4 CITY-ST-ZIP Miami FL 33133

5.1 TITLE EVP ☐ Change ☒ Addition
5.2 NAME Steve H. Townsend
5.3 STREET ADDRESS 3225 Aviation Ave 4th FL
5.4 CITY-ST-ZIP Miami FL 33133

6.1 TITLE VST ☐ Change ☒ Addition
6.2 NAME Axel de Saint-Quentin
6.3 STREET ADDRESS 3225 Aviation Ave 4th FL
6.4 CITY-ST-ZIP Miami FL 33133

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02-17-99

(305) 854-2229

CR2E034 (11/98)