FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P92000004218 (3)

Corporation Name	17	F3200000421	0 (3,	ļ

Principal Place of Business ACCORPORATION Name Principal Place of Business Maling Address										
8801 SAND LA LAKE WORTH		8801 SAND LAKE COURT LAKE WORTH FL 33467								
						3. Date Incorporated or Qualified		te of Las		
2. Principal Plac	e of Rusiness	2a. Mailing Address				11/09/1992 4. FEI Number		01/27/1	· · · · · · · · · · · · · · · · · · ·	
21	o or ocomoda	26				65-0365504		-	Applied For Not Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.	75 Additional	
22		27	***************************************				X		e Required	
City & State		City & State				Election Campaign Financing Trust Fund Contribution			.00 May Be	
Zip	Country	28 	Countr	0/		This corporation has liability for			ded to Fees	
24	25	29	30	,			Intarigible	tax unue	8 199.002,	
	9. Name and Address of Curre					10. Name and Address of New F	Registere	d Agent		
			8.	1 1	ernek					
PAQUET,			82	2 5	Street Addre	əss (P.O. Box Number is Not Acceptat	ole)			
	ID LAKE CT.		8:	-					·····	
LAKE WO	PRTH FL 33467									
			84	4 (City		F	85	Zip Code	
SIGNATURE	gnature, typed or printed name of registered age		orized by the cortes. (NOTE: Regenered Agenered			ation submits this statement for the puriod of directors. I hereby accept the approperation of the statement of the puriod of the puriod of the statement of the puriod of	DATE			
TITLE	D	DELETE	1, 1 71116	 :				Chang	ge 🔲 Addition	
NAME	PAQUET, GILLES		1.2 NAME							
STREET ADDRESS	8801 SAND LAKE CT.		1.3 STREE	E1 AD	DRESS					
CITY-ST-ZIP TITLE	LAKE WORTH FL 33467	☐ DELETE	1.4 C(TY-		TP .			F-1 Oh	. 🗖 🗠	
NAME	D Plante, rene	Пиш	2 1 TITLE 2.2 NAME					Chang	ge 🔲 Addition	
STREET ADORESS	2230 NE 211TH ST		2.3 STREE		DRESS					
CITY-ST-ZIP	N MIAMI FL 33180		2 4 CITY -		- 1					
TITLE		☐ DELETE	3. 1 T(TLE					Chang	ge 🔲 Addition	
NAME			3 2 NAME							
STREET ADDRESS			3.3 STRE		1					
CITY-ST-ZIP TITLE		☐ DELETE	3.4 Cily-		TIP	The state of the s		Chang	se [] Addition	
NAME		E SECTI	4. 1 THLE 4.2 NAME					L) Orient	ge 🔲 Addition	
STREET ADDRESS			4.3 STREE		DRESS				•	
CITY-ST-ZIP			4.4 CITY-							
TITLE		☐ DELETE	5 1 TILLE	-				Chang	ge 🔲 Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 \$TREE							
CITY-ST-ZIP TITLE		[T] DELETE	5.4 C(1) Y - 6 1 T(1) LE		TIP			[] Chang	Addition	
NAME			6.2 NAME					LI CHAR	ge	
STREET ADDRESS			6 3 STREE		DRESS					
CITY-ST-ZIP			6.4 CITY -	- ST - Z	MP P					
certify that to eath; that I	he information indicated on this ann	nual report or supplemental a poration or the receiver or tru:	urnished and do nnual report is to stee empowered	es n	ot qualify fo	or the exemption stated in Section 119 te and that my signature shall have the srpport as required by Chapter 607, Fi	same led	al effect a	is if made under	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/27/96 Delo Day de Porte F