


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

FILED

May 05 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P92000006980 (6)</b>					
1. Corporation Name <b>LA SOUPIERE INC.</b>					
Principal Place of Business <b>30360 OLD DIXIE HWY HOMESTEAD FL 33033 US</b>			Mailing Address <b>30360 OLD DIXIE HWY HOMESTEAD FL 33033-3215 US</b>		
2. Principal Place of Business 21 <u>Same</u> Suite, Apt. #, etc.		2a. Mailing Address 26 <u>Same</u> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>11/23/1992</b>	
22 City & State		27 City & State		3a. Date of Last Report <b>05/01/1996</b>	
23 Zip Country		28 Zip Country		4. FEI Number <b>65-0373766</b>	
24		29		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
9. Name and Address of Current Registered Agent <b>BREWER, LORA 424 NW 19TH STREET HOMESTEAD FL 33030</b>			10. Name and Address of New Registered Agent		
			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City <b>FL</b> 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 <u>Lora Brewer</u> <u>LORA BREWER Pres.</u> <u>4/24/97</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					
SIGNATURE: <u>Lora Brewer</u> <u>LORA BREWER</u> <u>4/24/97</u> <u>(305) 246-1633</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					



CR2E034 (9/96)