FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
95 JUL -7 AM 9:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P93000026328 (3)

1. Corporation Name
CHARPENTIER ENTERPRISES, INC.

Principal Place of Business	Mailing Address
18401 MURDOCK CIRCLE PORT CHARLOTTE FL 33948	18401 MURDOCK CIRCLE PORT CHARLOTTE FL 33948

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/08/1993
3a. Date of Last Report: 04/15/1994

2. Principal Place of Business
21 719 THIRD AVENUE
22 Suite, Apt. #, etc.
23 City & State: NEW SMYRNA BEACH, FL.
24 Zip: 32169
25 Country: USA

2a. Mailing Address
26 SAME
27 Suite, Apt. #, etc.
28 City & State: SAME
29 Zip: SAME
30 Country: SAME

4. FEI Number: APPLIED FOR 98-0141811 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MCKINLEY, MICHAEL R
18401 MURDOCK CIRCLE
PORT CHARLOTTE FL 33948

10. Name and Address of New Registered Agent

81 Name: CYNTHIA FERRARO
82 Street Address (P.O. Box Number is Not Acceptable): 719 THIRD AVENUE
83: NEW SMYRNA BEACH, FL
84 City: FL 85 Zip Code: 32169

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: Cynthia Ferraro CYNTHIA FERRARO 6/30/95
(Signature, type or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	P	☒ Change ☐ Addition
NAME	CHARPENTIER, RENE	1.2 NAME	RENE CHARPENTIER	
STREET ADDRESS	BRAHMSTRASSEE 20	1.3 STREET ADDRESS	719 THIRD AVENUE	
CITY-ST-ZIP	1000 BERLIN 45, GERMANY	1.4 CITY-ST-ZIP	NEW SMYRNA BEACH, FL	
TITLE		2.1 TITLE	S/T	☐ Change ☒ Addition
NAME		2.2 NAME	DORIS CHARPENTIER	
STREET ADDRESS		2.3 STREET ADDRESS	719 THIRD AVENUE	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	NEW SMYRNA BEACH, FL	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: RENE CHARPENTIER/PRESIDENT JUNE 30, 1995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

(904)™424-9173

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