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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000027409 (0)

YVON ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED Apr 15 1997 8:00am Secretary of State



							<u> </u>		
					3. Date Incorporated or Qualified 04/12/1993 3a. Date of Last Report 04/18/1996				
Principal Place of Business		Mailing Address			4. FEI Number		App	lied For	
1 4 PINE ST	TK 567 26	7 PINE	STR	ee7	65-0399624			Applicable	
Suite, Apt. #, etc. 27					5. Certificate of Status Desired		\$8.75 Ad Fee Fleq		
City & State City & State City & State City & State ZE FOLLY WOOD FL ZE ZE ZE ZE ZE ZE ZE ZE ZE Z								\$5.00 May Be Added to Fees	
	BROWARD 28	33023	Country	DUALD	8. This corporation has liability for		der s.		
9. Name and Address of Current Registered Agent				wyer.	Florida Statutes Yes LINO 10. Name and Address of New Registered Agent				
DROUIN, YVON	radices of Carrell Helist	orbu Agent	81	Name	10, Hallo bile Adoless of Hell II	SAISTOIGH MA	-		
- 2454 TORTUGAS 14	NE								
CONTAMINED ALE SI 22212				82 Stroot Address (P.O. Box Number is Not Acceptable)					
TONI LAUDENDALE	7- 000 IL		83	/ //	NE SIREE!				
				1					
			84	CIXLOLI	LUWOOD	FL	35 Zin C	グカクコ	
44 Descript to the programs of	f Continue CO2 OFO2 and GO	2 1500 Florido Status	ton the about		oration submits this statement for the		Pagging ite	registered	
 office or registered agent, o 	r both, in the State of Florid	 a. Such change was 	authorized by	the corporation	on's board of directors. I hereby acce	pt the appoin	tment as r	egistered	
agent. I am familiar with, an	d accept the obligations of,	Section 607.0505, FI	lorida Statute	S.					
SIGNATURE				· · · · · · · · · · · · · · · · · · ·					
	nd name of registered agent and title i OFFICERS AND DIREC			ent signature required	d when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CEDC AND D	DECTADO	IN 10	
12.	OFFICERS AND DIREC	DELETE	13.		ADDITIONS/CHANGES TO OFFI		Change	Addition	
DOOLIN MA	N)	L_ DELETE				L.K) Grange	LL Addition	
0454 TODTILO	ACLANE		1.2 NAME		A. NE STAGE				
STREET ADDRESS - 2909 TURIOU	PODE CL 00040		1.3 STREET	ADDRESS	PINE STREET	_, 2	300	L ユ	
CHY ST-ZIP + FURT DAUDE	IDINE PE GOOTE	Det ere	1.4 CITY - 9	ST-ZIP	rocky wood, r		To:	- <u>-</u>	
TITLE		L) DE1.ETE	2.1 TITLE		•	L	j Change	Addition	
NAME			2.2 NAME						
SIREET ADDRESS			2.3 STREET	TADDRESS					
City -St - 74°			2 4 CiTY-	ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE			L	Change		
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET	ADDRESS					
D(1Y - \$.1 - Z)**			3.4. CITY-	ST-ZIP					
TILLE		DETELE	4.1 TITLE		•		Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY ST ZIF			4.4 CITY-5	ST-ZIP				_	
TITLE		☐ DELETE	5.1 TITLE		**************************************		Change	Addition	
NAME			5.2 NAME						
STREET ADORESS			5.3 STREE	T ADDRESS					
CHY-SI-Z-P			5.4 C/TY-5						
TITLE		DELETE	6.1 TITLE				Change	Addition	
NAME		· ·	62 NAME	1			•	. =	
STREET ADDRESS				ADDRESS					
CITY - \$1 - 210			6.4 CITY-1						
	nformation supplied with th	is tiling does not gual			in Section 119.07(3)(i), Florida Statut	es. I further co	artify that t	he	
information indicated on this	s annual report or supplements the corporation or the receiver.	ental annual report is siver or trustee empor	true and acc wered to exec	urate and that I	my signature shall have the same leg as required by Chapter 607, Florida	al effect as if	made und	er oath; tha	