FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

"APPROVED AND FILED"

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000050479 (3)**

1. Corporate Name
P & L CHARTERS, INC.

Principal Place of Business
1030 U.S. HWY 1 #105
NORTH PALM BEACH FL 33408

Mailing Address
1030 U.S. HWY 1 #105
NORTH PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualified: 07/20/1993
3a. Date of Last Report: 03/30/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt. # — 22
Suite Apt. # — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: 65-0424782 — 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. Did corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LAZEAU, PAUL A
1030 US HIGHWAY 1
#105
NORTH PALM BEACH FL 33408

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 Section 607.0505 of the 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. The corporation agrees that it will comply with the provisions of all applicable laws and accept the appointment as registered agent. I am familiar with and accept the duties and obligations of Section 607.0505 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TYPE	D
NAME	LAZEAU, PAUL A
STREET ADDRESS	1030 US HWY 1 #105
CITY ST ZIP	N. PALM BEACH FL 33408
TYPE	D
NAME	LAZEAU, LISA J
STREET ADDRESS	1030 US HWY 1 #105
CITY ST ZIP	N. PALM BEACH FL
TYPE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS OR CHANGES TO OFFICERS AND DIRECTORS IN 12

TYPE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	
TYPE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	
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TYPE	☐ Change ☐ Addition
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STREET ADDRESS	
CITY ST ZIP	
TYPE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	

14. I hereby certify that the information supplied with this filing complies with the requirements of Section 607.0122(18), Florida Statutes. I further certify that the information listed on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and force as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears on Block 12 or Block 13 of the report or is attached with an addition.

SIGNATURE: Lisa J. Lazeau, Secretary — 5/4/95 — (407) 627-8966
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #
LISA J. LAZEAU

0247348 CF