

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 30, 2004 8:00 am
Secretary of State

09-30-2004 90013 015 ***550.00

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1. Entity Name
AMERIC DISC U.S.A.-FLORIDA INC.



Principal Place of Business
**8455 NW 30TH TERRACE
MIAMI, FL 33122 US**

Mailing Address
**8455 NW 30TH TERRACE
MIAMI, FL 33122 US**

54073715



2. Principal Place of Business

3. Mailing Address
2525 Canadien Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09242004

Chg-P

CR2E034 (10/03)

City & State

City & State
Drummondville, Quebec

4. FEI Number

65-0451013

Applied For

Not Applicable

Zip

Country

Zip

J2C 7W2

Country

Canada

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FELURAN, MARK S
2200 N COMMERCE PARKWAY
202
WESTON, FL 33326**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME RAYMOND, CLAUDE
STREET ADDRESS 2525 CANADIAN STREET
CITY-ST-ZIP DRUMMONDVILLE QC, J2C 7W2

TITLE President, Secretary, Director ☐ Change ☐ Addition
NAME Claude Raymond
STREET ADDRESS 2525 Canadien Street
CITY-ST-ZIP Drummondville, QC J2C 7W2

TITLE VO ☐ Delete
NAME FRAGMAN, CLAUDE
STREET ADDRESS 2525 CANADIAN STREET
CITY-ST-ZIP DRUMMONDVILLE QC, J2C 7W2

TITLE Vice President ☐ Change ☐ Addition
NAME Claude Fragman
STREET ADDRESS 2525 Canadien Street
CITY-ST-ZIP Drummondville, QC J2C 7W2

TITLE O ☒ Delete
NAME LOUIS-ROCH, LANGOLIS
STREET ADDRESS 2525 CANADIAN STREET
CITY-ST-ZIP DRUMMONDVILLE QC, J2C 7W2

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Claude Raymond

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/2004

Date

819-474-2655

Daytime Phone #