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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

P94000025743 (3) **DOCUMENT #**1. Corporation Name

VALLANCOURT & SON CORP

FILED Apr 17 1998 8:00am Secretary of State

AVIECA	11000111	a son com)
Principal Plac	e of Busines	s	Mai	ling Address				- 1 10014005 110 10111 41011 23011 60111 00111 00111 01005 31111 1601 01008 4161 1601	J
2460 S.W. 52ND ST. 2460 S.W. 52ND ST.									
FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312									
								DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified 03/30/1994	
2. Principal P	lace of Busin	noss	2a.	2a. Mailing Address				4. FEI Number Applied Fox	
21			26	26				65-0452939 Not Applica	
Suite, Apt.	#, etc		<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status Desired 38.75 Additiona	d
22 City & Stat	<u> </u>		27	City & State				Fee Required	
23	U			28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country						Country		8. This corporation owes or has paid the current year Intangible	
24	25		29]		Personal Property Tax due June 30. Yes No	
		and Address of Cu	rrent Registe	ered Agent				10. Name and Address of New Registered Agent	
VAILLANCOURT, PAULINE						31	Name		
2460 SW 52 ST						32	Street Addr	ress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33312						33			
					ľ	,3			
					[34	City	FI 85 Zip Code	
11. Pursuant	to the provis	ions of Sections 607.	0502 and 60	7.1508, Florida Statute	es, the abo	LL.	-named corp	poration submits this statement for the purpose of changing its register	red
office or r agent. I a	egistered ag im familiar wi	ent, or both, in the S th, and accept the o	tate of Florida bligations of	Such change was a Section 607 0505. Fig	authorized	by tes	the corporat	tion's board of directors. I hereby accept the appointment as registere	d
SIGNATURE		. ,		,					
Signature, typed or printed name of registered agent and title if applicable					1E: Registered Agent signature required			· · · · · · · · · · · · · · · · · · ·	_
12.	T	OFFICERS	AND DIRECT	ORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	****
NAME .	VAILLANCOURT, PAULINE		}			1.1 TITLE		Li Change L_i Addi	ILION
STREET ADDRESS	0400 OHI PO OT					1.2 NAME 1.3 STREET ADDRESS			
CITY-ST-ZIP		DERDALE FL			1.4 CITY				
TITLE	☐ DELE			DELETE	2.1 TITL		-2"	Change Addi	ition
NAME					22 NAME		İ	_ · · ·	
STREET ADDRESS					2.3 STR	EET A	VDDRESS .		
CITY-S1-ZIP					2. 4 CIT	2. 4 CITY-ST-ZIP			
TITLE	☐ DELETE					31 TITLE		Change Addi	ition
NAME					32 NAM				
STREET ADDRESS					1		NODRESS		
CITY - ST - ZIP				☐ DELETE	3.4. CITY		- ZIP	Character Addition	
TITLE NAME				☐ occent	4.1 TITL			☐ Change ☐ Addi	tion
STREET ADDRESS					4. 2 NAN		ADDRESS		
CITY-ST-ZIP					4.4 CITY				
TITLE				DELETE	5.1 T(TL)		- 411	☐ Change ☐ Addi	tion
NAME				_	5.2 NAM				- /-
STREET ADDRESS					5.3 STRE	ET A	ADDRES\$		
CHTY-ST-ZIP					5.4 CITY	- \$1-	- ZIP		

14. 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 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.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

61 TITLE 62 NAME 6 3 STREET ADDRESS

TITLE

STREET ADDRESS

CITY-ST-ZIP

DELETE