

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 MAR -1 PM 4: 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT
1995



STATE OF FLORIDA
DEPARTMENT OF REVENUE

DOCUMENT # P94000030706 (3)

PASTICHE, INC.

Principal Place of Business: 5104 BEACHWALK VILLAS DESTIN FL 32541
Mailing Address: 5104 BEACHWALK VILLAS DESTIN FL 32541

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 04/22/1994		3a. Date of Last Report	
4. FEI Number 59-3239388		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent HOFFMAN-USSELY, JOAN E 5104 BEACHWALK VILLAS DESTIN FL 32541				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
85 FL				85 Zip Code			

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: *Joan E. Hoffman-Ussery* (DATE: 2/23/95)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11.1 TITLE	PRESIDENT	11.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.2 NAME	JUAN E. HOFFMAN - USSELY	11.2 NAME	
11.3 STREET ADDRESS	5104 BEACHWALK VILLAS	11.3 STREET ADDRESS	
11.4 CITY, ST, ZIP	DESTIN, FL 32541	11.4 CITY, ST, ZIP	
11.5 TITLE	SECRETARY - TREASURER	11.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.6 NAME	DAVID D. USSELY	11.6 NAME	
11.7 STREET ADDRESS	5104 BEACHWALK VILLAS	11.7 STREET ADDRESS	
11.8 CITY, ST, ZIP	DESTIN, FL 32541	11.8 CITY, ST, ZIP	
11.9 TITLE		11.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.10 NAME		11.10 NAME	
11.11 STREET ADDRESS		11.11 STREET ADDRESS	
11.12 CITY, ST, ZIP		11.12 CITY, ST, ZIP	
11.13 TITLE		11.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.14 NAME		11.14 NAME	
11.15 STREET ADDRESS		11.15 STREET ADDRESS	
11.16 CITY, ST, ZIP		11.16 CITY, ST, ZIP	
11.17 TITLE		11.17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.18 NAME		11.18 NAME	
11.19 STREET ADDRESS		11.19 STREET ADDRESS	
11.20 CITY, ST, ZIP		11.20 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(b), Florida Statutes. I further certify that the information included on the 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. I am an officer or director of the corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears on Block 1, or on Block 2, if changed, or on an attachment with an address.

SIGNATURE: *Joan E. Hoffman-Ussery* (DATE: 2/23/95) (REGISTERED SECRETARY: 904-267-5104)