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

**PROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000075739 (0)

BEAUCHEMIN CORP.

CITY-ST-ZIP

Principal Place of Business Mailing Address 1950 WILTON DRIVE WILTON MANORS FL 33305 1950 WILTON DRIVE WILTON MANORS FL 33305-3909 3. Date Incorporated or Qualified 3a. Date of Last Report 10/13/1994 04/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0533359 Suite, Apt. #, etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Ζip Couritry Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BEAUCHEMIN, DANNY 81 Name 1950 WILTON DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **WILTON MANORS FL 33334** 83 84 Ćity

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    Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P0	DELETE	1.1 TITLE	☐ Change	Addition
NAME	BEAUCHEMIN, DANNY		1.2 NAME		
STREET ADDRESS	1950 WILTON DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	WILTON MANORS FL 33334		1.4 CITY - ST - ZIP		
TITLE	PD	DELETE	21 1111.15	Change	Addition
NAME	BEAUCHEMIN, NORMA		2.2 NAME		
STREET ADDRESS	1950 WILTON DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	WILTON MANORS FL 33334		2 4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE	☐ Change	Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE	Change	Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	-	DELETE	5.1 TITLE	Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHTY-ST-ZIP		
TITLE		☐ DELF1E	61 TITLE	☐ Change	Addition
NAME	•		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

6.4 CHTY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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 trusted 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. NURNA BEAUCHEMIN

**FILED** 

Apr 30 1997 8:00am

Secretary of State

Applied For

Zip Code

Not Applicable