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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000077376 (9)

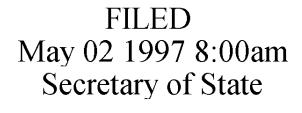
FERNAND LAMOTHE INC.

Principal	Place of	Business

721 S.E. 17TH STREET

Mailing Address

721 S.E. 17TH STREET



Loculare gene



FT. LAUDERDAL	LE FL 33316	FT. LAUDERDALE FL 3331	6-2927							
						3. Date Inc. 10/19/	corporated or Qualified 1994		ate of Last R 19/1996	teport
─ ·	ace of Business	2a. Mailing Address				4. FEI Nur			Ar	oplied For
	S.E. 17th Steef.		,			65-0	564567			ot Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certifica	ate of Status Desired		\$8.75	
22 FI- N	auderiale	27							Fee Re	equired
City & State)	City & State					Campaign Financing	-		May Be
23 F L		28	т			Trust Fu	nd Contribution		Added	to Fees
Zip → aaaa	Country	7ip	Cour	ntry			poration has liability for in			. 199.032,
24 3 33	16 25 USA	29	30					Yes		
1 414	9. Name and Address of Current	t Hegistered Agent		81	Name	10. Name a	and Address of New Re	gisterea	Agent	
	OTHE, FERNAND		l'	° '	inaine .					
	SE 17TH ST		Ī	82	Street Add	dress (P.O. Box	Number is Not Acceptab	le)		
SUIT			ļ.							
FT. L	AUDERDALE FL 33316			83	ı					
				84	City			FL	85 Zip	Code
office or re agent. I ar SIGNATURE	o the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was a diens of, Section 607.0505, Fl	authorized orida \$tatu	i by ites	the corpora i.	ation's board of	directors. I hereby accep	urpose of it the app	changing it ointment as	ts registered registered
	Signature, typed or printed name of registered ager			Aga	nt signature requ	vired when reinstating)		DATE		
12.	OFFICERS AND		13.		···	ADDITIO	NS/CHANGES TO OFFIC	ERS AND		
TITLE	PSTD	☐ DELETE	1.1 1 1	LE		J			L. Change	Addition
NAME	LAMOTHE, FERNAND		1,2 NAI	ME						
STREET ADDRESS	721 S.E. 17TH ST. #B		1,23 STF	REET.	ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	·	1,4 011	Y - \$1	1-2IP					
TITLE		☐ DELETE	. 2.1 TiTi	l.E					☐ Change	Addition
NAME			2.≱ NAI	ME						
STREET ADDRESS			2.3 STA	REET.	ADDRESS					
CITY-ST-ZIP			2,4 011	1Y - S	51 - 7 (P					
TITLE		☐ DELETE	3.1 111	l.Ē			M -		Change	Addition
NAME			32 NAI	ME						
STREET ADDRESS			3/3 \$1F	REET.	ADDRESS					
CITY-ST-ZIP			3,4.00	1Y-S	iT-ZIP					
TITLE		☐ DELETE	4.1 1(1)	LE					Change	Addition
NAME			4, 2 NA	ME						
STREET ADDRESS			4/3 STF	REET.	ADDRESS		4			
CITY-ST-ZIP			4,4 CIT	Y-S1	T- 71P					
TITLE		DELETE	5.1 TIT		-				Change	Addition
NAME			5.2 NAI							
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP			5.4 CH							
TITLE		DELETE	6.1 TIT		1.71				Change	Addition
NAME		C) percit	62 NA							Nounted
· '					1 Direct Co					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP	by certify that the information supplied	with this filing done not such	64 CIT			ed in Section 11	0 07/3)/i) Florida Statutor	. I further	r cartify that	tho
information I am an of	by certify that the limit matter supplied in indicated on this infruid report or si ficer or director of the coloporation or a Block 12 or Block 13 if Changed, or	upplemental annual report is t the receiver or trusted empoy	true and a vered to A	ccu kee	rate and that the this repo	at my signature ort as required b	shall have the same lega by Chapter 607, Florida S	effect as latutes; a	if made un nd that my r	der oath; that name