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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000019123 (5)

JEAN-PIERRE FARGEON, INC.

FILED Apr 28 1998 8:00am Secretary of State

Principal Place of Business 10205 COLLINS AVE. SUITE 808 BAL HARBOUR FL 33154		Mailing Address				T TRADITION THE PRINT BOTH BOTH BOTH BOTH BOTH HAVE HELD HELD HERD THE TODAY	
		-1149 KANE CONCOURSE 5TH FLOOR 1140 KANE CONCOURSE 5TH FLOOR BAY HARBOR ISLANDS FL 33154 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/09/1995			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			65-0577844	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27			5. Continuate of States Desired 7	Fee Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Z _I p Country		8. This corporation owes or has paid the current year Intangible			
24	25	[29]	30		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curr	ent Hegistered Agent		81 Name	10. Name and Address of New Registe	ared Agent	
	Vers, robert h 10 Kane Concourse 5 th f 10 Kane Concourse 5th f		his		ress (P.O. Box Number is Not Acceptable)		
	Y HARBOR ISLANDS FL 3315		~~ ~	83			
UA.	THE COLOR	•					
				84 City		FL 85 Zip Code	
SIGNATURE	Signature, typed or printed name of registered			D by the corpora utes. Agent signature requi	tion's board of directors. I hereby accept the ired when reinstating) ADDITIONS/CHANGES TO OFFICERS	ATE	
TITLE	PVST	DELETE	1.1.70	TLF T	ADDITIONO/OFFARGES TO OFFICE RE	Change Addition	
NAME	FARGEON, JEAN-PIERRE		1.2 NA	1			
STREET ADDRESS	10205 COLLINS AVE. #808	}	1.3 ST	REET ADDRESS			
CITY-ST-ZIP	BAL HARBOUR FL 33154		1.4 CF	TY-ST-ZIP			
TITLE	D	S ≮DELETE	2.1 TIT	TLE		Change Addition	
NAME	FARGEON, JEAN-PIERRE	,	2.2 NA	UME			
STREET ADDRESS	10205 COLLINS AVE. #808	}	2 3 ST	REET ADORESS			
CITY-ST-ZIP	BAL HARBOUR FL 33154	- Decemen		ITY-ST-ZIP		The same that a state of the st	
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NAME CIOCCI ADDOCCC			3.2 NA				
STREET ADDRESS CITY+ST-ZIP				REET ADDRESS			
TITLE		☐ DELETÉ	41 10		** WHITE IT THE ** THE	Change Addition	
NAME			4.2 N				
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
FETLE		DELETE	5.1 10			☐ Change ☐ Addition	
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
TITLE	_	DELETE	6.1 TIT			Change Addition	
NAME		\	6.2 NA	ME			
STREET ADDRESS		1		REET ADDRESS			
CITY-ST-ZIP	artifu that the ideas at 100	dana marza de		TY-ST-ZIP	Profice 140 07/9/0 First Design		
indicated officer or	on this annual teport or supplied director of the curporation or the re	with this hing does not quality ntal armual report is true and ac aceiver or trustae empowered to	ccurate and execute to	imption stated in I that my signatu his report as req	n Section 119.07(3)(i), Florida Statutes. I furth ure shall have the same legal effect as if mad juired by Chapter 607, Florida Statutes; and	de under oath; that I am an that my name appears in	