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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000029869

Corporation	Name							l l						
CAFE DU	J SOIR, INC.							1						
			<u> </u>											
Principal Place of Business Mailing Address														
21 ROYAL PALM BLVD 21 ROYAL PALM BLVD														
VERO BEACH FL 32960 VERO BEACH FL 32960									DO NOT WRITE IN THIS SPACE					
								3	3.	Date Incorporated or Qualifed				
								1		04/17/1995			ì	
2. Principal Pl	ace of Business	2a. Mailing Address					4		FEI Number		Applie	ed For		
21	÷	26						ļ	59-3315605			pplicable		
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.							Certificate of Status Desired	\$8.7				
22		27	27						Certificate of Citatos Desired	Fee	Requ	ired		
City & State	•	City & State					€		Election Campaign Financing	\$5.0		• 1		
23		28							Trust Fund Contribution		ed to f	ees		
Zip		ountry	Zip			untry] 8		This corporation owes the current year In	tangible ☐ Yes	_	No	
24	25		29		30	-				Personal Property Tax. Name and Address of New Registered			-	
	9. Name and A	Address of Current	t Registered	Agent		81	Name	110	U.	Name and Address of New Registered	- Agoin		·	
MARTIN, YANNICK J														
	OYAL PALM BL		82 Street Ac				Address	(P.	O. Box Number is Not Acceptable)					
VERO BEACH FL 32960														
	 					83								
, ,							City			FL	85 Z	ip Co	de	
44Pureuant	to the amvisions of	f Sections 607 050	2 and 607 1:	08 Florida Stati	ites: the	above	l e-named1	corporati	ion			its re	gistered	
office or re	egistered agent, or	both, in the State of accept the obligat	of Florida. Su	uch change was	authorize	d by	the corpo	ration's l	boa	submits this statement for the purpose of ard of directors. I hereby accept the appo	intment as	regis	tered	
- 3	m ramıllar with, and	accept the obligat	tions of, Sect	uon 607.0505, Fi	Uliua Sia	lules	•]	
SIGNATURE	Stonature, typed or printe	ed name of registered agen	t and title if applic	able. (NOT	E: Registere	d Agen	t signature re	quired when	н ге	instating) DATE				
12.	<u> </u>	D DIRECTORS			13.			Α	ADDITIONS/CHANGES TO OFFICERS A					
TITLE	DP			□ DELETE	1.11	TLE					☐ Chang	ge	Addition	
NAME	MARTIN, YANN	łiCK J		1			1.2 NAME							
STREET ADDRESS	21 ROYAL PAL		1.3			1.3 STREET ADDRESS								
CITY-ST-ZIP	VERO BEACH	FL 32960				1.4 CITY+ST-ZIP								
TITLE	DVTS DELETE				2.1 7	2.1 TITLE					Chang	ge	☐ Addition	
NAME	MARTIN, VALERIE J				2.2 !	2.2 NAME							ĺ	
STREET ADDRESS	21 ROYAL PALM BLVD				2.3 9	2.3 STREET ADDRESS				•				
CITY-ST-ZIP	VERO BEACH FL 32960					2. 4 CITY-ST-ZIP							7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
\$ITLE	•			☐ DÉLETE	3.11	TILE					Chang	ge	Addition	
NAME					3.21	MAME								
STREET ADDRESS					3.3 5	TREE	ADDRESS							
CITY-ST-ZIP						CITY-S	T-ZIP						☐ Addition	
TITLE				☐ DELETE	1	IITLE					Chan	ye	Addition	
NAME						NAME								
STREET ADDRESS				4.3 STREET ADDRESS								İ		
CITY-ST-ZIP	<u> </u>				_	S-YTK	T-ZIP				☐ Chan		Addition	
TITLE				☐ DELETE		TITLE NAME					L Clian	a _c	L AUGUSTI	
NIASEE :														

6.4 CITY-ST-ZIP CITY-ST-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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

ππε

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

Addition

☐ Change

= ::: ≣:::::

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90045 013 ***150.00