SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT **CÓRPORATION** ANNUAL REPORT

1997-



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000033780 (4) DOCUMENT #

PATRICE BISIOT, INC.

APPROVED AND FILED

1998 MAR -2 PM 1: 04

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address					T FORDIUM SID LOUGH BILLI BUTTH BEILD B	INION MANDE TAINNE ALEHE SANDAY ANDEY MANY ARRAE
19735 TURNBERRY WAY 19735 TURNBERRY WAY			WAY			
AVENTURA FL 33180		AVENTURA FL 33180				
					3. Date Incorporated or Qualified	E IN THIS SPACE
					T	***
2. Principal P	Place of Business	2a. Mailing Address			05/01/1995 · 4. FEI Number	05/01/1996
21			26		65-0577003	Applied For Not Applicable
Suite, Apt.	#. elc.		Suite, Apt. #, etc.		63-03/7003	60 7E
22	.,	, , , , , , , , , , , , , , , , , , ,	27		5. Certificate of Status Desired	Fee Regulred
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	 		CountryC		8. This corporation owes or has p	paid the current year Intangible
24]	25	29	30		Personal Property Tax due Jun	
	g. Name and Address of Curr	ent Registered Agent	8.	1 1	10. Name and Address of New R	legistered Agent
	IOT, PATRICE		*	1		
	35 TURNBERRY WAY		82 Street Ad		ress (P.O. Box Number is Not Accepte	1º461808
AVE	ENTURA FL 33180		8:			/9801103003
		1	0,		****30	-
		\mathcal{L}	84	City		FL 85 Zip Code
11, Pursuant to the provisions of Section 207.0102 40 101 1508, Florida Statutes, the above-na					poration authority this statement for the	
office or registered agent of both with 800 M. And Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered						
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
SIGNATURE Signatury, typed or printering the registered Agent signature. Signatury, typed or printering the registered Agent signature.					ired when reinstaling)	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	
TITLE	PO /	☐ DELET	E 1.1 TITLE			☐ Change ☐ Addition
NAME	BISIOT, PATRICE		1.2 NAME			
STREET ADDRESS	19735 TURNBERRY WAY		1.3 STREE	T ADDRESS		İ
CITY-ST-ZIP	AVENTURA FL 33180		1.4 CITY-	ST-ZIP		
TITLE		☐ DELETI	2.1 TITLE			☐ Change ☐ Addition
NAME			2.2 NAME			agn I
STREET ADDRESS			2.3 STREE	T ADDRESS		of action has
CITY+ST-ZIP			2.4 CITY	ST-ZIP		= NIT 01 - (2)2/10
TITLE		☐ DELET	3.1 THILE		peiNGTATEMI	Change Addition
NAME			3.2 NAME		REINSTATEM	
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP		TT No. con	3.4. CITY -	ST-ZIP		
TITLE		☐ DELET	,			☐ Change ☐ Addition
NAME			4. 2 NAME	į.		
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP		Doutt	4.4 CITY -	ST-ZIP		D Observed To Address
TITLE		☐ DELETĒ				L] Change L_ Addition
NAME			5.2 NAME			
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY -	ST - ZIP		Change Addition
TITLE		I'm DETER				Change [] Addition
NAME PROFES ADDOCCO		4	4.6.2 NAME	LDBBCGG		
STREET ADDRESS			6.3 STREE			
CITY-ST-ZIP			6.4 CITY-	I - ZIP		

14. I do hereby certify that the information supplied information indicated on this annual report of the Lam an officer or director of the corporation of appears in Block 12 or Block 13 if chapted, or ly for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the frue and accurate and that my signature shall have the same legal effect as if made under oath; that wered to execute this report as required by Chapter 607, Florida Statutes; and that my name

181/00