

Date Due: 05/01/93 Amount Due: \$200.00 If After Due Date: \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

~~1993~~ 1996

1. Name and Mailing Address of Corporation: DOCUMENT # P95000069437

YAN & NIG, INC  
2400 W BROWARD BLVD #1425  
FT. LAUDERDALE, FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 9-5-95  
3a. Date of Last Report

4. FEI Number: Applied FOA  
Applied For: Not Applicable

5. Certificate of Status Desired:   
\$8.75 Additional Fee (Report)

6. Election Campaign Financing Trust Fund Contribution:   
\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status:   
\$138.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes:  Yes  No

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2

FILING FEE: \$200.00  
ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE  
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

2. Mailing Address: 2400 N BROWARD BLVD  
Suite, Apt. #, etc: 1425

26. Principal Place of Business: 2400 W BROWARD BLVD  
Suite, Apt. #, etc: 1425

23. City & State: FT. LAUDERDALE FL  
28. City & State: FT. LAUDERDALE FL

24. Zip: 33312  
25. Country:   
29. Zip: 33312  
30. Country:

9. Name and Address of Current Registered Agent

YVAN ROILLARD  
2400 W BROWARD BLVD #1425  
FT. LAUDERDALE, FL 33312

10. Name and Address of New Registered Agent

81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City: FL  
85. Zip Code  
86. Country

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 my appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Yvan Roillard* DATE: 6/25/96

12. OFFICERS AND DIRECTORS

1.1 TITLE: DUAN ROILLARD  
1.2 NAME: DUAN ROILLARD  
1.3 ADDRESS: 2400 W BROWARD BLVD #1425  
1.4 CITY - ST - ZIP: FT. LAUDERDALE, FL 33312  
2.1 TITLE:   
2.2 NAME:   
2.3 ADDRESS:   
2.4 CITY - ST - ZIP:   
3.1 TITLE:   
3.2 NAME:   
3.3 ADDRESS:   
3.4 CITY - ST - ZIP:   
4.1 TITLE:   
4.2 NAME:   
4.3 ADDRESS:   
4.4 CITY - ST - ZIP:   
5.1 TITLE:   
5.2 NAME:   
5.3 ADDRESS:   
5.4 CITY - ST - ZIP:   
6.1 TITLE:   
6.2 NAME:   
6.3 ADDRESS:   
6.4 CITY - ST - ZIP:

13. OFFICERS AND DIRECTORS CHANGES

1.1 TITLE:   
1.2 NAME:   
1.3 ADDRESS:   
1.4 CITY - ST - ZIP:   
2.1 TITLE:   
2.2 NAME:   
2.3 ADDRESS:   
2.4 CITY - ST - ZIP:   
3.1 TITLE:   
3.2 NAME:   
3.3 ADDRESS:   
3.4 CITY - ST - ZIP:   
4.1 TITLE:   
4.2 NAME:   
4.3 ADDRESS:   
4.4 CITY - ST - ZIP:   
5.1 TITLE: 800001884708  
5.2 NAME: -07/05/96--01030--007  
5.3 ADDRESS: \*\*\*225.00  
5.4 CITY - ST - ZIP:   
6.1 TITLE:   
6.2 NAME:   
6.3 ADDRESS:   
6.4 CITY - ST - ZIP:

14. I 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. I further certify 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12, Box 13 if a change, or on an attachment with an address.

SIGNATURE: *Yvan Roillard* DATE: 6/25/96

Print/Type Name of Signing Officer or Director: Title(s): Daytime Telephone Number: ( )