

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000082092 (4)

1. Corporation Name

LE RENDEZ-VOUS DANCING U.S.A., INC.



Principal Place of Business

6245 N. FEDERAL HIGHWAY
SUITE 502
FT. LAUDERDALE FL 33308

Mailing Address

6245 N. FEDERAL HIGHWAY
SUITE 502
FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified
10/26/1995

3a. Date of Last Report
NONE

2. Principal Place of Business

21 721 S.E. 17th STREET

2a. Mailing Address

26 721 S.E. 17th STREET

4. FET Number
65-0808030

X Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23 FT. LAUDERDALE, FL.

City & State

28 FT. LAUDERDALE, FL.

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

24 33316

County

25 BROWARD

Zip

29 33316

County

30 BROWARD

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAVERDURE, LUC
6245 N. FEDERAL HIGHWAY
SUITE 502
FT. LAUDERDALE FL 33308

81 Name
LAVERDURE, LUC

82 Street Address (P.O. Box Number is Not Acceptable)
721 S.E. 17th STREET

83

84 City

FT. LAUDERDALE

FL

85 Zip Code
33316

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME LAVERDURE, LUC
STREET ADDRESS 6245 N. FEDERAL HWY #502
CITY-ST-ZIP FT. LAUDERDALE FL 33308

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME LAVERDURE, LUC
1.3 STREET ADDRESS 721 S.E. 17th STREET
1.4 CITY-ST-ZIP FT. LAUDERDALE, FL. 33316

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-08-96

Date

954-455-0568

Daytime Phone #

CR2E034 (12/95)