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	UAL REPORT		Mortham .	and the fact to 600
	1997 - 1997	Secret DIVISIC ON OR	ary nate CORATIONS	93 MAY 15 PM 1:56
	NO. 6			OFFICE OF STATE
DOCU 1. Corporation	IMENT #44600	5010100		SECRETARY OF STATE TALLAHASSEE, FLORIDY.
_				To Market VI To See To
PAN	YERFORMANCE	E Sunian Ca	2000 1	1/
Principal Plac	ce of Business	Mailing Address	VI JI JOH	" OA AA MA
•	ideRolale, FL.	Mailing Address 10097 CLE Swite 213 Plantation	المطاريه	y y y X RK
T. 12H	WERCHICE, FC.	S. 45 312	ng isa	"
		PLANTATION, 1	1 222	3. Date Incorporated or Qualified 3a. Date of Last Report
2. Principal f	Place of Business	28. Maiing Address		FEBRUARU 15 1996 A FF) Number J Applied For
1		26		65065 50 76 Noi Applicable
Suite. Apt.	#, etc	Suite, Apt #, etc.		5. Certificate of Status Desired See Required
City & Stat	te	Cily & State		6. Election Campaign Financing \$5.00 May Be
3		28		Trust Fund Contribution
Zip	Country 25	7 (p	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
<u> </u>	9. Name and Address of Current			10. Name and Address of New Registered Agent
1015	DAI GNEAULT		81 Name	
10007	CLEARY BLUD		82 Street	Address (P.O. Box Number is Not Acceptable)
C	E 2/3		83	
		22221	84 City	■■ 85 Zip Code
(P Purcuant	HALLON FLORIDA	and 607 1508. Florida Statuto	s the above-names	corporation submits this statement for the purpose of changing its registered
office or	registered agont, or both, in the Style of	ol Florida, Such change was a Lors of Section 607,0505, Flori	uthorized by the cor	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	I as la	Greaul	X	
12.	Striature type for proline carrie of registers classers OFFICERS AND	DIRECTORS (NOTE	Registered Agent signature 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PRAJOENT	DELETE	1 1 TITLE	☐ Change ☐ Addition
NAME	Lois DAIGNEAULY	d SUHADIR	1.2 NAME	800002540578>
STREET ADDRESS CITY-ST-ZIP	10097 CLEARY BU PLANTATION, FLORI	DA 33354	13 STREET ADDRESS 14 CITY - ST - ZIP	8000002530578016 -05/20/3801098016
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NAME			22 NAME	
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NAME			3 2 NAME	<u> </u>
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CITY-ST-ZIP Title		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	☐ Change ☐ Addition
AME			5.2 NAME	A -144.7
FREET ADDRESS			5.3 STREET ADORESS	1. alan
CITI® ST-ZIP TITLE		DELETE	5.4 C-TY - S1 - 7/P 6.1 TITLE	5 15 17 Change Addition
NAME			6.2 NAME	
STREET ADDRESS		•	6.3 STREET ADDRESS	•
CITY-ST-ZIP	by certify that the information supplied	with this filing does not qualify	64 Crty - \$1 - ZiP for the exemption s	tated in Section 119.07(3)(i), Florida Statutes, I further certify that the
information	on indicated on the annual report or su officer or director of the corporation or t	applemental ånnua! report is fr The receiver or trustee empowe	pe and accurate and gred to execute this	that my signature shall have the same legal effect as if made under oath; that opport 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 addi	ess.	1 1
SIGNAT	TURE: Tranklais	reault Lo	ois Dail	INVERULT 20/12/97 954-370-2336
•- ••	SIGNATURE AND TYPED ON	PRINTED NAME OF SIGNING OFFICER I	OR DIRECTOR	Daytime Prione #

PHONE NO. :

May. 06 1998 11:07AM P2



10097 Cleary Blvd. Suite 215 Plantation, Florida 33324 Tel: 954-370-2336 Fax: 954-370-0006

May 6, 1998

Florida Department of State
Division of Corporations
Att: Amy Alan (Document Specialist)

Ref#: P96 000010100

Dear Amy,

Attached please find a money order in the amount of \$315.00 for Peak Performance Swim Camp.

The full amount was originally sent to you in November of '97. It was then returned to us because of a missing signature.

It was then returned to you in December of '97. It was then returned to us as the EIN # was not correct. I then returned it to you in February of '98.

Now this document has been returned to us asking why the document is late. The above should explain the misunderstanding.

Sincerely,

Lais Maigreaut.

TEAM CAMPS • SUMMER SWIM CAMP • MASTER / TRIATHLETE CAMPS CAMPS TO GO! • PRIVATE CAMPS • ALTITUDE CAMPS