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

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90040 030 ***150.00

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DOCUMENT #	P96000011237
1. Corporation Name	1 00000011201

CAN-AM GOLF GROUP, INC.

Principal	Place	of	Business	

Mailing Address

100 N.W. 51ST COURT

100 N.W. 51ST COURT

FT. LAUDERDALE FL 33309

FT. LAUDERDALE FL 33309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

							02/05/1996			
2.	Principal Place of Business	2a	. Mailing Address			4.	FEI Number		Τ.	Applied For
21		26			}		65-0656842		\mathbf{I}	Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.				Certifcate of Status Desired		-	Additional Required
23	City & State	28	City & State		,		Election Campaign Financing Trust Fund Contribution	•		0 May Be d to Fees
24	Zip Country	29	Zip Cou	ntry			This corporation owes the current year Int Personal Property Tax.	angible		□No
	9. Name and Address of Current	Regis	stered Agent		1	٥.	Name and Address of New Registered	Agent		
	GOULET, HARMEL			81	Name					
	100 N.W. 51ST COURT,			82	Street Address	(P.	O. Box Number is Not Acceptable)			
	FT. LAUDERDALE FL 33309			83						
				84	City		FL	85	Zi	p Code
11.	Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	Flori	da. Such change was authorized	by '	the corporation's	ion bo	submits this statement for the purpose of ard of directors. I hereby accept the appoi	changi ntment	ing as	its registered registered
SIC	NATURE									

agent. 1 a	in taining with, and accept the obligations of occur	511 551 10055, 1 10114	a oracaco.			
SIGNATURE	Signature, typed or printed name of registered agent and title if applical	hie (NOTE: Re	egistered Agent signature required	d when reinstating)	DATE	
12.	OFFICERS AND DIRECTOR	<u>` </u>	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	GOULET, HARMEL		1,2 NAME			
STREET ADDRESS	100 N.W. 51ST COURT		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33309		1.4 CITY-ST-ZIP			
TITLE	P	☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME	GOULET, HARMEL		2.2 NAME			
	100 NW 51ST CT		2.3 STREET ADDRESS			
STREET ADDRESS	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP			
CITY-ST-ZIP	FI. LAUDENDALE FL	DELETE	3.1 TITLE		☐ Change	Additio
TITLE	•	_ occere	3.2 NAME			_
NAME			3.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change	Additio
TITLE		Decer				
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			44 CITY-ST-ZIP		Change	Additio
TITLE		☐ DELETE	5.1 TITLE		Change	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Additio
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
]		64 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.

SIGNATURE: