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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000022654 (3)

L'AUBERGISTE INCORPORATED

Princ	tipal Place of Business	
2074	TERRALIAN OT	

Mailing Address

FILED May 02 1997 8:00am Secretary of State



2001 TERRAMAR ST. FT. LAUDERDALE FL 33304	2801 TERRAMAR ST. FT. LAUDERDALE FL 33	2801 TERRAMAR ST. FT. LAUDERDALE FL 33304-4010				
19				3. Date Incorporated or Qualified 03/11/1996	3a. Date of	Last Report
2. Principal Place of Business	2a. Mailing Address	~	······································	4. FEI Number		Applied For
21 2801 TERRAMA	2 St 26 2801 14	FREAMA	R St	65-0722543	Ì	Not Applicable
Suite Apr # etc 22 Sente # 109	Suite, Apt. #, etc.	109		5. Certificate of Status Desired		.75 Additional ee Required
City & State 23 F-LAUDERAALE A	BEACH 28 FT LAYOF	FROME	BEACH	Election Campaign Financing Trust Fund Contribution		5.00 May Be added to Fees
Zip Country 24 33304 25 BLO	WARU 29 33304	Country_	OWARI	1	Yes 🔀 No	
9. Name and Address	s of Current Registered Agent			10. Name and Address of New Re	gistered Agent	
POIRIER, ROBERT		81	Name			
2801 TERRAMAR ST.		82	Street Addre	ess (P.O. Box Number is Not Acceptab	ie)	· · · · · · · · · · · · · · · · · · ·
FT. LAUDERDALE FL 3330)4	83		1,14		
		84	City		FL 85	Zip Code
Pursuant to the provisions of Sectic office or registered egent, or both, agent. I am familiar yart, and acor-	ons 607.0502 and 607.1508, Florida Stat	utes, the above	named corpo	pration submits this statement for the p		ging its registered
agent I am familiar voti, and acord	pt the objigations of, Section 607 0505, I	Florida Statutes.	me corporatio	on's board of directors. Thereby access	or the appointm	eur az refilzteted
SICNIATURE X ALLEANING	EL POUNT	J		4	121/9	7
grature typed or printed name.		OTE: Registered Ager	t signature require		DATE	OTODO 111 40
	ICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TIME ChAIR M		1.1 TITLE	ĺ	1		hange Addition
NAME ROBERT	4. 10116186	1.2 NAME				
STREET ADDRESS 2/625 SUT	TERS KANE	1.3 STREET	1			
	ON FLA. 33428	1.4 CITY - ST	ZIP			Line I Marie
TIPLE PRESIDENT	C P.O. DELETE	2.1 TITLE			ا لــا	hange L. Addition
NAME ROBERT C	POIRIEL TERS LANG TOW FLA. 33418	2.2 NAME				
STREET ADDRESS 21625 504	TEKS KHNE	2.3 STREET				
CHY-SI-ZIF 30CA	SIDE LATE DELETE	2 4 CITY - ST	- ZIP			hange Addition
THE VICE PRE	3144 W	3.1 TITLE	1		٠ لــــ١	Hange LI Notation
NAME ERIC Y. F	DOIRIER	3.2 NAME	200555			
STREET AUDRESS 124 6. 54	62040	3.3 STREET	}			
CITY-ST-ZIP BOCA RATE	DELETE	3.4. CITY-ST	- ZIP		116	hange
TITLE	L., VECETE	4.1 TITLE				dange Li Audilion
NAME		4. 2 NAME				•
STREET ADDRESS		4.3 STREET	Į.			
CHY-SY-ZIP	DELETE	4.4 CITY-ST	· ¿IP			hange Addition
TOTALE	LJ OELEIE	5.1 TITLE	1		 (sieniše FT voditioti
NAM !		5.2 NAME		4		
STREET ADDRESS	•	5.3 STREET	T I			
City-SI-2i6	Finetere	5.4 CITY - ST	- ZIP			bonna dustra
THE	☐ DELETE	61 TITLE			□ c	hange Addition
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET	INDEED			
· ···· · · · · · · · · · · · · · · · ·		0.001110217	1DUNE 55			

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 enjanged, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/47 (954) 564-5614