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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000026677

LOUIS D'OR CORPORATION

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90010 013 ***150.00



Driveria al Diago	of Business	M	ailing Address						
Principal Place			O THORNTON						
916 SE 21 AVE CAPE CORAL FL 33904		1216 SW 20TH ST.							
ONI E COMPLET	2 30304		PE CORAL FL 33991			DO NOT WRI	TE IN THIS	SPACE	
		, US	;			3. Date Incorporated or Qualifed			
						03/21/1996			
2. Principal P	lace of Business	2a	. Mailing Address			4. FEI Number			plied For
21		26				65-0724902			t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A	
22		27							equired
City & Stat	е	\vdash	City & State			6. Election Campaign Financing		\$5.00	
23		28				Trust Fund Contribution	 	Added t	o rees
Zip	Country	<u> </u>	Zip		untry	8. This corporation owes the cur	rent year inte	angibie □Yes	□No ·
24	25	29		30	т	Personal Property Tax. 10. Name and Address of New	Boolstored .		
	9. Name and Address of Curr	rent Regis	stered Agent		81 Name	10. Name and Address of New	registered i	-gent	
٥٦٦	MANIM EDNIECT A				oi Name				
	Mann, ernest a Del Prado Blvd				82 Street Addr	ress (P.O. Box Number is Not Accept	able)		``
	E CORAL FL 33904				-	The second secon	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	17 3 1 2 1	#210 (2 2) 1 2 3 1
UAP	E CURAL FL 33904				83				7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
					84 City			85 Zip (Code
					<u> </u>	the submite this statement for the	F L	changing its	registered
						poration submits this statement for the on's board of directors. I hereby acce	pt the appoi	ntment as re	gistered
agent. I a	registered agent, or both, in the Sta im familiar with, and accept the obl	ligations of	f, Section 607.0505, FI	orida Stat	tutes.				·
SIGNATURE		ř				The state of the s	DATE		
	Signature, typed or printed name of registered OFFICERS		· · · · · · · · · · · · · · · · · · ·	E: Registered	d Agent signature require	ADDITIONS/CHANGES TO O		D DIRECTO	DRS IN 12
12.		AND DIK	☐ DELETE		TITLE	87 (47)4502		Change	☐ Addition
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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 at 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 or an attackment of the appendix supplementation of the corporation of the corporatio

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR