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FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000033398 (4)**

1. Corporation Name
TARTES EN FOLIE, INC.

Principal Place of Business
**1033 WASHINGTON ST
HOLLYWOOD FL 33019**

Mailing Address
**1033 WASHINGTON ST
HOLLYWOOD FL 33019-1923**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**PIERRET, ISABELLE
1033 WASHINGTON ST
HOLLYWOOD FL 33019**

3. Date Incorporated or Qualified
04/15/1996

3a. Date of Last Report

4. FEI Number

65-0674208

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the
office or registered agent, or both, in the State of Florida. Such change was authorized
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

I, the named corporation submits this statement for the purpose of changing its registered
agent by the corporation's board of directors. I hereby accept the appointment as registered
agent.

SIGNATURE

ISABELLE PIERRET

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

(NOTE: Registered agent signature required when reinstating)

April 25 1997

12. OFFICERS AND DIRECTORS

TITLE **D/P** ☐ DELETE

NAME **PIERRET, ISABELLE**
STREET ADDRESS **1033 WASHINGTON ST**
CITY-ST-ZIP **HOLLYWOOD FL 33019**

TITLE **D** ☒ DELETE

NAME **JAGUENAUD, JEAN-PIERRE**
STREET ADDRESS **11 RUE D'ALLUT**
CITY-ST-ZIP **34170 CASTELNAU FRANCE**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1

1.2

1.3

1.4

2.1

2.2

2.3

2.4

3.1

3.2

3.3

3.4

4.1

4.2

4.3

4.4

5.1

5.2

5.3

5.4

6.1

6.2

6.3

6.4

**Officer - V Vice President
PIERRET, JACQUES
1033 Washington St
HOLLYWOOD FL 33019**

☐ Change

☒ Addition

☐ Change

☐ Addition

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☐ Addition

14. I do 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.

SIGNATURE:

ISABELLE PIERRET

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

April 25 1997

Daytime Phone #

CR2E034 (9/96)