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FILED

May 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortimer  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000049677 (3)

1. Corporation Name

ROBERT J. DOUVILLE SYSTEMS, INC.

Principal Place of Business

22 HASTINGS LANE  
BOYNTON BEACH FL 33462

Mailing Address

22 HASTINGS LANE  
BOYNTON BEACH FL 33462-7118



3. Date Incorporated or Qualified

06/10/1996

3a. Date of Last Report

06/10/1996

2. Principal Place of Business

21 1533 N.E. 32nd ST

Suite, Apt. #, etc.

22 Oakland Park

City & State

23 FL

Zip

24 33334

Country

25 Broward

2a. Mailing Address

26 2805 E Oakland Park Blvd

Suite, Apt. #, etc.

27 Suite 106

City & State

28 Ft. Lauderdale FL

Zip

29 33306

Country

30 Broward

4. FEI Number

65-0677521

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

9. Name and Address of Current Registered Agent

DOUVILLE, ROBERT J  
22 HASTINGS LANE  
BOYNTON BEACH FL 33462

10. Name and Address of New Registered Agent

B1 Name Robert J. Douville

B2 Street Address (P.O. Box Number is Not Acceptable)

B3 1533 N.E. 32nd ST

B4 City

Oakland Park

FL

B5 Zip Code

33334

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-24-97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DOUVILLE, ROBERT J  
STREET ADDRESS 22 HASTINGS LANE  
CITY-ST-ZIP BOYNTON BEACH FL 33462

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Robert J. Douville  
1.3 STREET ADDRESS 1533 N.E. 32nd ST  
1.4 CITY-ST-ZIP Oakland Park FL 33334

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-24-97 954-564-7353

0328036

CR2E034 (9/96)