## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 20, 2005 08:00 AM **DOCUMENT # P96000074258 Secretary of State** 1. Entity Name PETIT TRIANON CORP. Principal Place of Business Mailing Address 329 WORTH AVENUE P.O. BOX 2467 PALM BEACH, FL 33480-2467 US UNIT #4 PALM BEACH, FL 33480 01122005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-0695070 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent PELLONI, MICHAELA DO NOT WRITE 329 WORTH AVE UNIT 4 PALM BEACH, FL 33480-2467 IN THIS SPACE 3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be **FILE NOW!!! FEE IS \$150.00** Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. U00000187356 01/24/05-80008-020 150.00 TITLE CAJIGAS, CARLOS M NAME STREET ADDRESS 329 WORTH AVENUE, UNIT #4 PALM BEACH, FL 33480 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE त्रमञ्जूषा १५०० स्ट.च हे ५ हे १८५० । १९१७ - अर्थेल इस्टेटिंग्स्ट एस्ट NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

ATTIME AND TYPED OF DEINTED NAME OF JOHNING OFFICER OR DIRECT

<u> (1) 802-512</u>

**FILED**