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FILED
Sep 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000094495 (4)**

1. Corporation Name
TORREX CORP.



Principal Place of Business

**721 SE 17TH ST
FT LAUDERDALE FL 33316**

Mailing Address

**721 SE 17TH ST
FT LAUDERDALE FL 33316**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/19/1996

4. FEI Number

65-0720577

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 **6093 OLD COURT RD**

Suite, Apt. #, etc.

22 **242**

City & State

23 **BOCA RATON, FL**

Zip

County

24 **33433**

25 **USA**

2a. Mailing Address

26 **6093 OLD COURT RD**

Suite, Apt. #, etc.

27 **242**

City & State

28 **BOCA RATON, FL**

Zip

Country

29 **33433**

30 **USA**

9. Name and Address of Current Registered Agent

**LEDUC, REJEAN
721 SE 17TH ST
FT LAUDERDALE FL 33316**

10. Name and Address of New Registered Agent

81 Name

ELISE GENDRON

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

6093 OLD COURT RD, #242

83

84

BOCA RATON

FL

85 Zip Code

33433

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

ELISE GENDRON

5-4-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSD** ☒ DELETE

NAME **CHARETTE, CLAUDE**

STREET ADDRESS **721 S.E. 17TH ST**

CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE **S** ☐ DELETE

NAME **GENDRON, ELISE**

STREET ADDRESS **4824 N.E. 23 AVE.**

CITY-ST-ZIP **FT LAUDERDALE FL**

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

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 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

ELISE GENDRON

CR2E034 (10/97)