## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000040413 (1)

CANAL, INC.

Principal Place of Business

Mailing Address

**FILED** Jan 28 1998 8:00am Secretary of State



8401 CRESPI BLVD. MIAMI BEACH FL 33141		8401 CRESPI BLVD. MIAMI BEACH FL 33141		DO NOT WRITE IN THIS	SPACE		
					3. Date incorporated or Qualified 05/07/1997		
21 201		26. Mailing Address 26. 20.13 LA1	KE ]	DRIVE	4. FEI Number 755357	<del></del>	pplied For ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	•	Additional equired
City & State		City & State CASSEL	BE	RRY	Election Campaign Financing     Trust Fund Contribution		May Be to Fees
24 327	07 25 USA		Ocupit OS	A		Yes [	tangible No
	9, Name and Address of Current R	egistered Agent	81	Name	10. Name and Address of New Registered	Agent	
ISRIEL, RONALD J 20801 BISCAYNE BLVD., 4TH FL.				IName			
			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
AVENTURA FL 33180			83				
			84	City	FL	<b>85</b> Zip (	Code
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, typod or printed name of registered agent and title it applicable (NOTE: Registered Agent signature)					ired when reinstating) DATE		
12.	OFFICERS AND D	IRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOF	RS IN 12
TITLE	D	DELETE	1.1 TITLE			☐ Change	Addition
NAME	CORDIER-LASSALLE, THIERY		1.2 NAME				
STREET ADDRESS	8401 CRESPI BLVD.		1.3 STREE	t Address			
CITY-ST-ZIP	MIAMI BEACH FL 33141	DELETE	1.4 C/TY -	ST-ZIP		T 0	T Addition
TITLE		□ Dereit	21 TITLE 22 NAME			Change	Addition
STREET ADDRESS			1	T ADDRESS			
CITY-ST-ZIP			2.4 CiTY-	-			
TITLE		DELETE	3.1 TITLE	31-111		Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY - ST - ZIP			3.4. CITY-	SY-ZIP			
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-S1-ZIP	····		4.4 CITY-	ST - ZIP		<del></del>	
TITLE		∐ DELETE	5.1 TITLE			L Change	Addition
NAME			5.2 NAME				ı
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY-3	ST-ZIP		Change	Addition
TITLE		TH DECEIR	6.1 TITLE			L Change	ET MODITION
NAME			6.2 NAME	TADADECC			
STREET ADORESS			1	T ADDRESS			
14. I hereby c	ertify that the information supplied with t	his filing does not qualify for t	6.4 CITY - the exemp		Section 119.07(3)(i), Florida Statutes. I further ce	ertify 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 are the receiver of 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 chapter, by on an attachment with an address.							