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 # P97000040442 (0)

ESPOIR CORPORATION

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



	ST 1 STREET #137	126 NORTHEAST 1 STREET #137				
MIAMI FL 33132		MIAMI FL 33132			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 05/07/1997	
2112	HOLLYWOOD BLYD		moc	o Bu		
Suite, Apt.	Suite, Apt. #, etc. 337 Suite, Apt. #, etc. 27 337				5. Certificate of Status Desired \$8.75 Additional Fee Required	
23 HOI					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
zip 330		29 FL . USA 30	Country 33.4	20	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No	
	9. Name and Address of Current R	egistered Agent			10. Name and Address of New Registered Agent	
AMERILAWYER CHARTERED 81				Name		
343 ALMERIA AVENUE CORAL GABLES FL 33134			82	82 Street Address (P.O. Box Number is Not Acceptable)		
			00	83		
			53			
			84	City	FL 85 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.						
SIGNATURE Signature, by edit or printed outlet of registered agent and title diagraphicable (NOTE: Registered Agent signature required when reinstating) DATE DATE						
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	DELETE	1.1 TITLE		PALLINGER MARTINE Change Addition	
NAME	STEWART, CHARLOTTE		1.2 NAME	1;	BALLENGER MARTÈNE 126 NE 154 ST. # 137	
STREET ADDRESS	126 NORTHEAST 1 STREET #13	37	1.3 STREET	ADDRESS	MIAMI, FL. 33132	
CITY-ST-ZIP	MIAMI FL 33132	- Delete	1.4 C/TY - 9	I - 2(P		
TITLE	STD	☐ DELETE	2.1 TITLE	-	Change Addition	
NAME	BALLINGER, MARTINE	17	2.2 NAME			
STREET ADORESS	126 NORTHEAST 1 STREET #13 MIAMI FL 33132) ⁷	2.3 STREET	1		
CITY-ST-ZIP TITLE	MIMMI PE 33132	DELETE	2. 4 CITY - 3.1 TITLE	ST-ZIP	Change Addition	
NAME			3.2 NAME	l		
STREET ADDRESS			3.3 STREET	ADDOLGG		
CITY-ST-ZIP			3.4. CITY-			
TITLE		DELETE	4.1 TITLE	31-211	Change Addition	
NAME		<u> </u>	4. 2 NAME		_ , ,	
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	- 1		
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - 5			
14. I hereby c	ertify that the information sympliced with	this filing does not qualify for t	he exemp	tion stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated on this annual report or supplemental innual 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 of the report 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 of our fit and changes.						