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FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000097798 (7)

1. Corporation Name

THE PROVENCE ET LA BAUX CORPORATION

Principal Place of Business

16161 VENTURA BLVD.
#452
ENCINO CA 91436

Mailing Address

16161 VENTURA BLVD.
#452
ENCINO CA 91436

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/10/1997

4. FEI Number

☒ 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 1221 BRICKELL AV

Suite, Apt. #, etc.

22 9th Floor

City & State

23 MIAMI FL

Zip

24 33131 25 USA

2a. Mailing Address

26 1221 BRICKELL AV

Suite, Apt. #, etc.

27 9th Floor

City & State

28 MIAMI FL

Zip

29 33131 30 USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 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 responsibilities of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type for printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME OKUDA, GLORIA
STREET ADDRESS 16161 VENTURA BLVD.
CITY-ST-ZIP ENCINO CA 91436

TITLE ☐ DELETE

NAME OKUDA, AMY M
STREET ADDRESS 517 S BURNSIDE
CITY-ST-ZIP LOS ANGELES CA 90036

TITLE ☐ DELETE

NAME HARRY S. OKUDA III
STREET ADDRESS 1221 BRICKELL 9th Floor
CITY-ST-ZIP MIAMI, FL 33131

TITLE ☐ DELETE

NAME SCOTT D. OKUDA
STREET ADDRESS 1221 BRICKELL 9th Floor
CITY-ST-ZIP MIAMI, CA 33131

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

Signature of registered agent

4/15/98 3:59 PM

CR2E034 (10/97)