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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P98000020986

1. Corporation Name

FILED

00 JAN 14 PM 12: 10

SECRETARY OF ST.

UNFOR	GETTABLE OF USA INC			TALLAHASSEE, FLORIDA	
				THE THE THE TAILS THAT SAME SAME SAME THE DESIGNATION OF THE PARTY AND T	1881
1					
Principal Plac	ce of Business	Mailing Address		ı şmayrası iyo işirə iğiri ağılı ağılı ağılı ağılı bişi sasın iğiş ağılı ralığı (diği diği)	
721 SE 17TH	STREET	721 SE 17TH STREET			
FT LAUDERDA	LE FL 33316	FT LAUDERDALE FL 33316		r	
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
2. Principal F	Place of Business	2a. Mailing Address	<u> </u>	03/05/1998	
21		26		4. FEI Number Applied Fo Applied Fo Not Applied Fo	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		\$8.75 Additions	
22		27		5. Certificate of Status Desired Fee Required	
City & Sta	te	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip 	Country	Zip _	Country	This corporation owes the current year Intangible	
24	25	29 3	0	Personal Property Tax. Yes No	
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered Agent	
LAM	IOTHE, FERNAND				
	SE 17TH STREET		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
· FI I	AUDERDALE FL 33316		83		
			84 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607:1508; Florida Statutes	, the above-named co	omoration submits this statement for the number of changing its registers	ed
office or i	registered agent, or both, in the State or im familiar with, and accept the obligat	of Florida. Such change was auth	harized by the corpora	ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	is in the description of the series	10113 01, 0000011 007.0000, 1 10110	o Otaluics.		
CICITATORE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: Re	egistered Agent signature requ	<u> </u>	- {
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13	1
TILE	DP	☐ DELETE	1,1 TITLE 🔼	P Change ☐ Add	
NAME	LELIEVRE, DIANE			LELIEVKE, DIANE	
STREET ADDRESS			1.2 NAME	"LELIEVRE, DIANE 304 Flagler Ave	
	39 HICKSON ST LAMBERT		1.3 STREET ADDRESS	304 flagler Ave	
CITY-ST-ZIP	QUEBEC CANADA J4R 2N4	OCIETE	1.3 STREET ADDRESS	304 flagler Ave New Smyrna Beach Fl. 32170-2	dition
TITLE	QUEBEC CANADA J4R 2N4 S	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	304 flagler Ave New Smyrna Beach Fl. 32170-2 Avae. Alain Change Add	dition
TITLE NAME	QUEBEC CANADA J4R 2N4 S AUBE, ALAIN	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 36	304 flagler Ave New Smyrna Beach Fl. 32170-2 Avas Alain Change Add 104 flagler Ave	dition
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Interest certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the informatindicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am to 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 for on an attracting my title an address, with all other like empowered.

SIGNATURE: ≤

12-08-99