

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000025417

1. Entity Name
BIOMASSE INTERNATIONAL INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90005 037 ***150.00

Principal Place of Business
**721 S.E. 17TH STREET
FORT LAUDERDALE FL 33316**

Mailing Address
**721 S.E. 17TH STREET
FORT LAUDERDALE FL 33316**

64464



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0909206**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAMOTHE, FERNAND
721 S.E. 17TH STREET
FORT LAUDERDALE FL 33316**

Name **MARK COHEN CPA**
Street Address (P.O. Box Number is Not Acceptable)
1772 EAST TRAFALGAR CIRCLE
City **Holly wood** FL Zip Code **33020**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

(NOTE: Registered Agent signature required when re-registering)

DATE **4/13/01**

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **DUFRESNE, BENOIT**
STREET ADDRESS **3360 COTE RICHELIEU, TROIS RIVIERES OUEST**
CITY-ST-ZIP **(QUEBEC) G8Y 3J4 CANADA**

TITLE ☐ Change ☐ Addition:
NAME ☐ Change ☐ Addition:
STREET ADDRESS ☐ Change ☐ Addition:
CITY-ST-ZIP ☐ Change ☐ Addition:

TITLE **VPSD** ☒ Delete
NAME **DUFRESNE, SIMON**
STREET ADDRESS **175 RUE THIFFAULT, CAP DE LA MADELEINE**
CITY-ST-ZIP **(QUEBEC) G8W 1Y5 CANADA**

TITLE **V/T/S/D** ☐ Change ☒ Addition:
NAME **GAGNON JEAN**
STREET ADDRESS **6792, Cr. Verdon, Laval, (Québec)**
CITY-ST-ZIP **H7L 4P9 CANADA**

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition:
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NAME ☐ Change ☐ Addition:
STREET ADDRESS ☐ Change ☐ Addition:
CITY-ST-ZIP ☐ Change ☐ Addition:

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: (Jean Gagnon)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 6, 2001 (514) 232-9653
Date Daytime Phone #

CR2E034 (10/00)