2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P99000097928 Jun 08, 2000 8:00 am MICHEL DUPEY DEVELOPMENT, THE **Secretary of State** 06-08-2000 90432 044 ***150.00 Principal Place of Business Mailing Address 777 South Flagher Mite Suite 800W "West Palm Beach, P233401 80100078 2. Principal Place of Business 4411 Beacon Circle 4411 Beacon Circle Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 65 - 0967073 City & State Bahn Beach Fe City & State West Palm Beach Applied For Not Applicable Zip 33407 \$8.75 Additional Certificate of Status Desired 33*40*7 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Philippe J. Brian Philippe J. Brian 777 South Flagher Mire Suit 800W West Palm Beach, Fl 33401 Street Address P.O. Box Number is Not Acceptable) Suite 1A City West Rohn Brach 333 668 J 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 DU-29-00 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS DPT PMichel Dupey Addition TITLE NAME Golfdes Hadilas - Bassussarry NAME Allee de Courbois STREET ADDRESS STREET ADDRESS 64600 Anglet (CFrance) 64200 Biarritz. (France) CITY-ST-ZIP CITY-ST-ZIP Prancoise Dupey Delete Golfoles Maniles - Bassussavry DVP TITLE NAME Alléé de Courbois STREET ADDRESS STREET ADDRESS 64600 Anglet (France). 64200 Biauntz (France) CITY-ST-ZIP -TITLE TITLE NAME NAME clivete Suit 14 STREET ADDRESS STREET ADDRESS West Palm Beach Fe 33407 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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. Philippe J. Brian