

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05/01/1994 10:02

DOCUMENT # **S86091** (3)

1. Corporation Name
S & T SABLE PASS, INC.

Principal Place of Business Mailing Address
29 HOLLY RD **29 HOLLY RD**
STE #200 **STE #200**
HAMPSTEAD QU QUEBEC **HAMPSTEAD QU QUEBEC**
QC **QC**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/09/1991** 3a. Date of Last Report **05/01/1994**

2. Principal Place of Business 2a. Mailing Address
21 **3 WESTMOUNT SQUARE** 26 **3 WESTMOUNT SQUARE**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **#814** 27 **#814**
City & State City & State
23 **WESTMOUNT, QUEBEC** 28 **WESTMOUNT, QUEBEC**
Zip Country Zip Country
24 **H3L2S5** 25 **CANADA** 29 **H3L2S5** 30 **CANADA**

4. FEI Number **98-0120673** 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
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
BEDZOW, MICHAEL
20803 BISCAYNE BLVD.
STE. #200
AVENTURA FL 33180

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 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. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE: _____ (Signature, please include name of registered agent and title if applicable) (REG) (Registered Agent signature included when registering) (DATE)

12. OFFICERS AND DIRECTORS	
TITLE	PTD
NAME	ZEMEL, TOMMY
STREET ADDRESS	29 HOLLY ROAD
CITY, ST, ZIP	HAMPSTEAD, CANADA
TITLE	VS
NAME	ZEMEL, SHEILA
STREET ADDRESS	29 HOLLY ROAD
CITY, ST, ZIP	HAMPSTEAD, CANADA
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	3 WESTMOUNT SQUARE #814
14 CITY, ST, ZIP	WESTMOUNT, QUEBEC, H3L2S5, CANADA
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	3 WESTMOUNT SQUARE #814
24 CITY, ST, ZIP	WESTMOUNT, QUEBEC, H3L2S5, CANADA
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(b), 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 on block 12 or 13 of this report, or as an attachment with an affidavit.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 4/95 311-665-5570
Secretary of State