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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V12534

GILLES GRENIER ENTERPRISES, INC.

(6)

**FILED** Feb 05 1997 8:00am Secretary of State



206 S.E. 10TH STREET SUITE 301 DANIA FL 33004		200 SU	206 S.E. 10TH STREET SUITE 301 DAMA FL 33004-4427			3. Date Incorporated or Qualified				
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number		· · · · · · · · · · · · · · · · · · ·	plied For
21			26 204 N.E 2 nd PRENUE			65-0312739			t Applicable	
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.		·		5. Certificate of Status Desired		\$8.75 A	
City & State	e		City & State		******		6. Election Campaign Financing	***************************************	\$5.00	May Be
23			DANIA	FL			Trust Fund Contribution		Added t	
Zιp	Country	ļ	Zip		intry		8. This corporation has liability for			199.032,
24	25	29	33004	30	ν.	SA		Yes 🗵		<del></del>
	9. Name and Address of Curre	nt Regis	stered Agent	81 Name			10. Name and Address of New Re	gistered A	gent	
	NIER, GILLES				61	Name				
206 3 APT	SE 10TH ST			;	82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
	IA FL 33004				83		· · · · · · · · · · · · · · · · · · ·		***************************************	
									Tagl 7:-	· · · · · · · · · · · · · · · · · · ·
					84	City		FL	<b>85</b> Zip (	
agent + a SIGNATURE.	in familiar with, and accept the oblig Signature tyricala proceduces of regulared ag OFFICERS AN	ort and list	o if suplicable (NC				poration submits this statement for the pation's board of directors. I hereby accelured when reinstaling)  ADDITIONS/CHANGES TO OFFICE	DATE		
TITLE	P		DELETE	1.1 TI	TLE			1	Change	Addition
NAME	GRENIER, GILLES		•	1.2 N	AME					
STREET ADDRESS	206 S.E. 10TH STREET			1.3 \$	TREET	ADDRESS				
CITY - ST - ZIP	DANIA FL			1.4 C	ITY-S	T-71P				
TITLE			DELEYE	2 1 TI	TLE			[	Change	Addition
, NAME				2.2 N	AME					
STREET ADDRESS				235	TREET	ADDRESS				
CITY - ST - ZIP			Library			ir-zip				A SECTION
I IIIi.E			☐ DELETE	3.1 1					Change	Addition
NAME				3.2 N				ı		
STREET ADDRESS						ADDRESS				
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TITLE	İ		LJ DELLIL	4.2 M			·	,	Ondrigo	L Nacition
NAME CARGET ADDRESSES						ADDRESS				
STREET ACORESS						,				
C(TY-ST-ZIP TITLE			DELETE	4.4 C 5.1 T	ITY - S ITLF	1 * £H*			Change	Addition
NAME				5.2 N						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				1	ITY-S					
1/1/F			DELETE	6.1 To					Change	Addition
NAME			<del></del>	62 N				·	-	
STREET ADDRESS						ADDRESS				

64 CiTY - ST - ZIP 14. I do hereby 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 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.

CITY-SI-ZIP