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 # V26372

(5)

POURBAIX HOLDING CO., INC.

FILED
Apr 18 1997 8:00am
Secretary of State

Principal Plac		Mailing Address			* 1980) Allela (1818 4118 4111 19514 1181 1		
2701 GW 69 C		7875 SW 66 ST. Miami Fl. 33143-2712					
MIAMI FL 3315 US	99	US					•
				`	3. Date Incorporated or Qualified 04/03/1992	3s. Date of Last 05/14/1996	Report
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	1	pplied For
21 26							lot Applicable
Sulte, Apt. 22	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State City & S			itale		6. Election Campaign Financing	• — • • • • • • • • • • • • • • • • • •	
Zin Country		28			Trust Fund Contribution Added to Fees		
Zip 24	Country	Zip	Cou	intry	8. This corporation has liability for in		s. 199.032,
24	25 9. Name and Address of Curre	29	30		Florida Statutes 10. Name and Address of New Reg	Yes No	
***		ur Hegisteren Agent		B1 Name	10. Name and Address of New Reg	Jistoreu Ayerit	
POL	JRBAIX, ADHEMAR F.			Name			
	5 SOUTHWEST 68TH STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable	lo)	
MIA	MI FL 33143		:	83			
				83			
				84 City		85 Zir	Code
····		A122 A224 A224 A224 A224 A224 A224 A224		l1		FL °° ''	
office or i	registered agent, or both, in the State am familiar with, and accept the oblig	o of Florida. Such change wa gations of, Section 607.0505,	s authorize Florida Stat	d by the corporal lutes.	poration submits this statement for the pi lion's board of directors. I hereby accep	t the appointment a	s registered
SIGNATURE	Signature, typed or printed name of registered ag	(A)	OTE: Depotes	d Agent signature requi	and whos rejectating)	DATE	
12.		ID DIRECTORS	13.	a rigo it aig lottine radio	ADDITIONS/CHANGES TO OFFIC		PRS IN 12
TITLE	D	DELETE	1,1 TI	TLF		☐ Change	
NAME	POURBAIX, ADHEMAR F		1.2 N	AME			
STREET ADDRESS	7875 S.W. 66TH STREET		1.3 \$1	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			ITY-ST-ZIP			
TITLE		DELETE	2.1 TI			Change	☐ Addition
NAME			2.2 N	AME			
STREET ADDRESS			2.3 S1	TREET ADDRESS			
CITY-ST-ZIP			2.40	ITY-ST-ZIP			
TITLE		DELETE	3.1 TI	····-		☐ Change	Addition
NAME			3.2 N	AME			
STREET ADDRESS			3.3 \$1	IREET ADDRESS			
CITY-ST-ZIP				ITY-S1-ZIP			
TITLE		DELETE	4,1 Ti			☐ Change	Addition
NAME			4.2 N	AME			
STREET ADDRESS			4.3 S	TREET ADDRESS			
CITY-ST-ZIP				ITY - \$1 - ŽIP			
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NAME			5.2 N	AME			
STREET ADDRESS			5.3 S	TREET ADDRESS			
CITY-ST-ZIP				ITY-\$T-ZIP			
TITLE		DELETE	6.1 71			☐ Change	Addition
NAME			6.2 N	•			
STREET ADDRESS				IREFI ADDRESS	•		
CITY-ST-ZIP				ITY-ST-ZIP			
	1		0.4 6	11111211211			

14. I do 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 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 officient with an address.