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Feb 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **V34657** **(9)**

1. Corporation Name
CORENO, INC.

Principal Place of Business	Mailing Address
2450 NE 137 ST. **N. MIAMI BEACH FL 33181**	**2450 NE 137 ST.** **N. MIAMI BEACH FL 33181-3510**

3. Date Incorporated or Qualified: **05/07/1992**
3a. Date of Last Report: **06/20/1996**

2. Principal Place of Business
21 410 N.E. 102nd. Street
22 Suite, Apt. #, etc.
23 City & State: MIAMI SHORES FLORIDA
24 Zip: 33138-2453
25 Country: USA

2a. Mailing Address
26 410 N.E. 102nd Street
27 Suite, Apt. #, etc.
28 City & State: MIAMI SHORES FLORIDA
29 Zip: 33138-2453
30 Country: USA

4. FEI Number: **65-0336194** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
BOUTIN, PAUL
2450 N.E. 137TH STREET
N MIAMI BEACH FL 33181

10. Name and Address of New Registered Agent
81 Name: BOUTIN PAUL
82 Street Address (P.O. Box Number is Not Acceptable): 410 N.E. 102nd Street
83
84 City: MIAMI SHORES FL 85 Zip Code: 33138-2453

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Paul Boutin PAUL BOUTIN PRESIDENT February 24, 97
Signature of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		☐ DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		☐ Change ☐ Addition
TITLE	PSD		1.1 TITLE	PSD	
NAME	BOUTIN, PAUL		1.2 NAME	BOUTIN PAUL	
STREET ADDRESS	2450 NE 137 ST.		1.3 STREET ADDRESS	410 N.E. 102nd Street, MIAMI SHORES	
CITY-ST-ZIP	N. MIAMI BEACH FL		1.4 CITY-ST-ZIP	FL 33138-2453	
TITLE	VP	☐ DELETE	2.1 TITLE	VP	☐ Change ☐ Addition
NAME	DROLET, STEPHANE		2.2 NAME	DROLET STEPHANE	
STREET ADDRESS	2499 NE 135TH LANE		2.3 STREET ADDRESS	2450 N.E. 137 Street	
CITY-ST-ZIP	NORTH MIAMI BEACH FL		2.4 CITY-ST-ZIP	NORTH MIAMI BEACH FL 33181	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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 attachment with an address.

SIGNATURE: Paul Boutin PAUL BOUTIN FEBRUARY 24, 97- 30 305-759-0290
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #