

APR-11-1997 11:12 FROM LAWRENCE H., ROGOVIN, P.A. TO
APR -11' 97(PRI) 09:14 CSC

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FILE NOW: FILING FEE AFTER MAY 1 IS \$650.00

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra M. Mathern Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # V59518 1. Corporation Name MAJOR ST-LAURENT FLORIDA, INC.					
Principal Place of Business 1975 E SUNRISE BLVD 5th FLOOR FT LAUDERDALE FL 33304		Mailing Address ALLAN FLOM C/O ROYWEST INVESTMENTS 3575 BLVD ST-LAURENT #811 MONTREAL CANADA H2X 2T7		8000002200408-3 -06/03/97-01109-017 ****165.00 ****165.00	
2. Principal Place of Business		2a. Mailing Address		2. Date incorporated or Qualified 08/24/1992	
3. Principal Place of Business		3a. Mailing Address		2a. Date of Last Report	
4. Principal Place of Business		4a. Mailing Address		4. Filing Number 65-0356297	
5. Principal Place of Business		5a. Mailing Address		5. Certificate of Status Desired ☐ \$8.78 Additional Fee Required	
6. Principal Place of Business		6a. Mailing Address		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. Principal Place of Business		7a. Mailing Address		7. This corporation has liability for intangible tax under s. 199.022, Florida Statutes ☐ Yes ☒ No	
8. Name and Address of Current Registered Agent		8a. Name and Address of New Registered Agent		8. Name and Address of New Registered Agent	
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SIGNATURE: *Alan F. Flom* *PD* *24 April 97*
Signature, typed or printed name of registered agent and filer if applicable (NOTE: Registered Agent signature required when returning)
12. OFFICERS AND DIRECTORS
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Alan F. Flom* *Apr. 24/97* (514) 843-3782
Signature and types on printed name of Secretary of State or Director