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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

2. Principal Place of Business

GALLET, YVES

Suite, Apt. #, etc.

City & State

810 N.W. 9TH

US

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Zip

DANIA FL 33004

DOCUMENT # J92159

Country

9. Name and Address of Current Registered Agent

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(9)

GALLET ENTERPRISES, INC.

2a. Mailing Address

City & State

Suite, Apt. #, etc.

Mailing Address 810 N.W. 9TH AVE DANIA FL 33004-2336

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SECRETARY OF STATE TALLAHASSEE, FEORIDA

3. Date Incorporated or Qualified 3a. Date of Last Report 09/02/1987 10/21/1996
09/02/1987 10/21/1996
4. FEI Number . Applied For
65-0006743 Not Applicate
-5Certificate of Status Desired Fee Required
6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
.8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
10. Name and Address of New Registered Agent
idraes /P.O. Boy Number is Not Accentable)

	N.W. 9TH AVE		82	Street A	ddress (P.O. Box	Number is	Not Accepta	ole)			
DAN	IA FL 33004		83								1
			63								
•	•		84	City				FL	85 Zip C	Code	
1 Purcuant	to the provisions of Sections 607.0502 and 607.1508, Flor	da Statutes, the	above	-named	corporation subm	its this state	ment for the	ournose of	changing its	registered	1-
affica ar r	to the provisions of Sections 607.0502 and 607.1508, Flor egistered agent, or both, in the State of Fibrida. Such chair familia with, and accept the obligations of, Section 60.	nge was authori	zea ov	tine com	oration's board o	f directors. I	hereby acce	pt the app	ointment as	registered	Ì.
	m raminer with, and accept the obligations or, section so.	YVS (11:35	•••		9/6	100			l
SIGNATURE	Signature types or printed name of registered agent and title if applicable	• -	ered Age	nt signature	required when reinstatin			, DATE]
2. ::	OFFICERS AND DIRECTORS	1	3.		ADDITIO	ONS/CHANC	SES TO OFFI	CERS AND	DIRECTOR		18
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Country

81 Name

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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.

6.4 CITY-ST-ZIP