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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L14412 1. Corporation Name

FILED Apr 19, 1999 8:00 am Secretary of State 04-19-1999 90026 042 ***150.00

D'PIERH	E CUNSTRUCTION, INC.									
Principal Plac	e of Business	- Mailing Address				٦	f 100110011 201 (1011 01211 01001 71610 1101 01011		F B1851 B1811 1865	
6801 RICH RD. N. FT. MYERS FL 33917 6801 RICH RD. N. FT. MYERS FL 33917							DO NOT WEITE IN THE	COACE		
						_	DO NOT WRITE IN THI	- SFACE		1
						3.	Date Incorporated or Qualifed 09/06/1989		`	
2 Driesinal D	Name of Business	2a. Mailing Address				1	FEI Number		Applied For	1
						"	59-1309544		Not Applicable	1
21 25 Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.75	Additional	1
22 27 27				. <u> </u>			. Certificate of Status Desired	Fee F	Required	
City & Stat	te	City & State	City & State			6.	. Election Campaign Financing		May Be	Į
23		28					Trust Fund Contribution		to Fees	-
Zip	Country	Zip		intry		8.	. This corporation owes the current year In	tangible ☐ Yes	□No	}
24	25	29	30	1			Personal Property Tax. Name and Address of New Registered			1
	9. Name and Address of Curre	ent Registered Agent	 -	81	Name	10.	. Nattle and Address of New Adgrateroe			1
· PED	ersen, kjell					_				4
2555 ESTERO BLVD.				82	Street Adda	ess (F	P.O. Box Number is Not Acceptable)			
	MYERS BEACH FL 33931			83						1
								1 C		-
0000	,			84	City		F	85 . Zij	Code	
		502 and 607.1508, Florida S	tatutes, the a	bove	e-named corp	oratio	on eubmits this statement for the purpose (f changing i	ts registered	1
-ffina ar i	registered agent, or both, in the Stat am familiar with, and accept the obli	io of Glorido Suich change W	iae alimonzo	าทา	the comorau	on's b	oard of directors. I hereby accept the appo	intment as	registered	l
	arrigania was, and accept the open	g=110110 411 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	,							1
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable.	(NOTE: Registere	i Agen	t signature require					- 6
12.		AND DIRECTORS	13.		 -		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC		- 5
TITLE	PD DELETE			1.1 TITLE				□ Ollangi		}
NAME	POIRIER, EPHREM A.			1.2 NAME						1 8
STREET ADDRESS			- 1		ADDRESS					5
CITY-ST-ZIP	N. FT. MYERS FL VST □ DELEŢE			1.4 CITY-ST-ZIP 2.1 TITLE				Chang	e	. 8
TITLE				2.2 NAME					_	1
NAME OTREET ADDRESS	DORESS 6801 RICH RD.				REET ADDRESS					
STREET ADDRESS	N. FT. MYERS FL		1.		T.ZIP====					_
TITLE	14. CT. MILLIOTE	DELET						Chang	e 🔲 Addition	7
NAME			3.2 N	AME			•			
STREET ADDRESS			3.3 9	TREET	ADDRESS					
ÇITY-ST-ZIP			3.4. (S-YTI	T-ZIP					
TITLE	1	☐ DELE1	E 4.1 T	ITLE				☐ Chang	e Addition	1
NAME	(4.21	IAME	1					
STREET ADDRESS			4.3 S	TREET	ADDRESS					1
CITY-ST-ZIP				пү∙ѕ	r-ZIP					4
TITLE		DELE1			•			Chang	e Addition	}
NAME			5.2 N				•			1
STREET ADDRESS	3				ADDRESS					
CITY-ST-ZIP				ITY-S	r-zip			Chang	e Addition	4
TITLE		☐ DELET	1	AMÉ				⊏спа∪д	- Modimon	
NAME	1		■ 62 N		1					ı
STREET ADDRESS					LADODESS					1
STREET ADDRESS	3		6.3 5		ADORESS					

14. I 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, with all other like empowered.

SIGNATURE: