PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000060763

A-CHALET CONSTRUCTION INC.

Principal Place of Business 2550 SUNSET POINT RD Mailing Address

2550 SUNSET POINT RD CLEARWATER FL 34625

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90197 033 ***150.00



CLEARWATER FI	L 34625	CLEARWATER FL 34625							DO NOT WRITE IN THIS SPACE					
									3. Date incorporated or Qualifed]
									08/27/1993					l
2 Principal Pla	ace of Business		2a.	Mailing Address	s				4, FEI Number		$\overline{}$	App	lied For	1
21	200 01 000111000		26						59-3202870			Not	Applicable	1
Suite, Apt. #, etc.				Suite, Apt. #, etc.					\$8.75 Additional					1
22				27					5. Certificate of Status Desired		Fee Required			
City & State	<u></u>		2',	City & State		-			6. Election Campaign Financing		\$5	.00	day Be	7
23	•	28						Trust Fund Contribution			ded to		Ĺ	
Zip		Country	1-0	Zip		Count	Ty		8. This corporation owes the curr	ent year int	angible			
24	25	•	28		30				Personal Property Tax.		Yes	<u> </u>] <u>№</u>	ł
28]		Address of Current I	,,,,,	stered Agent	1001				10. Name and Address of New I	Registered	Agent]
	<u> </u>					8	11	Name						
FARIC	d, ashraf \$					Ļ	1		ddays (O.O. Bay Niverbay is Not Assess	bla				┨
2550 SUNSET POINT RD							2	Street Address (P.O. Box Number is Not Acceptable)						
CLEARWATER FL 34625				-			3							1
						L	1							4
						8	4	City	·	FL	85	Zip C	DØ8	1
	- 	4.00-10-007.0500	-46	07 1509 Florida	Ctabiles #		100	named o	progration submits this statement for the	ourse of	changin	a its r	egistered	1
11. Pursuant to	o the provisions of agistered agent, of	r both, in the State of	Floric	da. Such change	was author	zed b	y t	he corpor	ation's board of directors. I heraby accep	of the appoi	ntment	as reg	stered	1
agent, i an	n familiar With, an	d accept the obligatio	ns of,	, Section 507.050)5, Florida 3	tetute	38.		•					
SIGNATURE				Was Market	INOVE: Beats		uni i	alonation etc	ulred when reinstating)	DATE				
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: OFFICERS AND DIRECTORS						per ii	adiamis in	ADDITIONS/CHANGES TO OF	FICERS AN	D DIRE	CTOF	IS IN 12	18
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CITY-ST-ZIP	CLEARITATION	<u> </u>		DELE		1 TITLE		-	V P		Cha	inge	Addition	5
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NAME								NDORESS	HEINEN, MARCUS 9715 FRED ST.					Ì
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14. I hereby of	ertify that the infor	mation supplied with	this fi	iting does not qua	lify for the	xeme	otio	n stated i	n Section 119.07(3)(i), Florida Statutes.	further cer	tify that	the in	formation	

4. 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:

AND THE SOURCE OF DETECTOR

1/15/99

(727) 797-6777