SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 OF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION' ANNUAL REPORT

1999

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

24

Zip

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

12.

TITLE

NAME

TITLE

NAME

TITLE

NAME

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000067677

Country

9. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

25

7766 NORTHWEST 25TH STREET

KESSLER, LAWRENCE M

7766 N.W. 25TH STREET

BOCCARD, VINCENT M

1363 S.E. 6TH AVENUE

DEERFIELD BEACH FL

MARGATE FL

KESSLER, LAWRENCE M

MARGATE FL 33063

BOCCARD HOMES & KESSLER CONSTRUCTION INC.

Principal Place of Business Mailing Address 1353 SE 6TH AVE 1363 SE 6TH AVE DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441

26

27

28

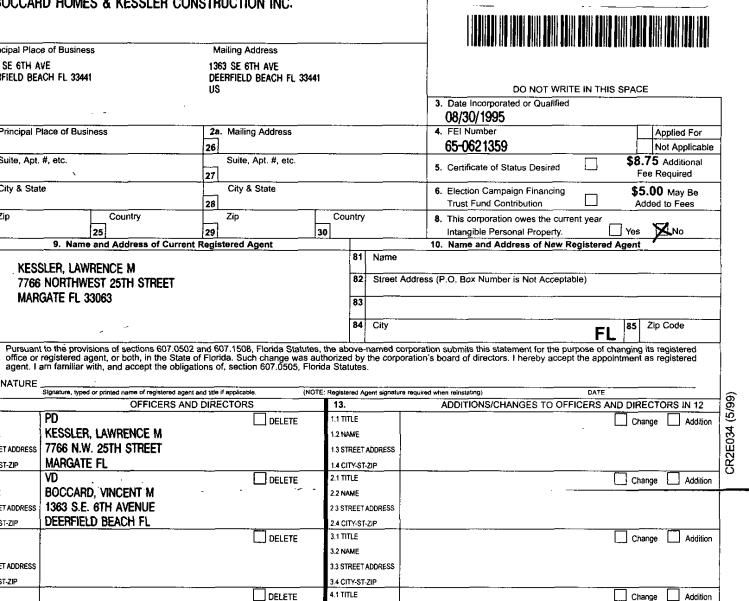
29

City & State

Zip

FILED Aug 23, 1999 8:00 am Secretary of State

08-23-1999 90005 010 ***550 00



CITY-ST-ZIP 6.4 CITY-ST-ZIP 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.

4 2 NAME

5 1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

IG OFFICER OR DIRECTOR

Change

Change

Addition

Addition