

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

FILED
Apr 12, 1999 8:00 am
Secretary of State

04-12-1999 90040 033 ***150.00

DOCUMENT # 603325

1. Corporation Name
ISLEY AND DEREUIL, P.A.

Principal Place of Business
SUITE 424 BAYVIEW BUILDING
1040 BAYVIEW DR
FORT LAUDERDALE FL 33304

Mailing Address
SUITE 424 BAYVIEW BUILDING
1040 BAYVIEW DR
FORT LAUDERDALE FL 33304



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1971

4. FEI Number

59-1375033

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

DEREUIL, LOUIS J
1040 BAYVIEW DRIVE
SUITE 424
FORT LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

81 Name DEREUIL, LOUIS J.
82 Street Address (P.O. Box Number is Not Acceptable)
2600 N.E. 14TH STREET CAUSEWAY
83
84 City POMPAHO BEACH FL 85 Zip Code 33062

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ISLEY, HUGH G JR
STREET ADDRESS 797 MIDDLE RIVER DRIVE
CITY-ST-ZIP FT LAUDERDALE, FL 00000

DELETE

TITLE SD
NAME DEREUIL, LOUIS J
STREET ADDRESS 4750 NE 25TH AV
CITY-ST-ZIP FORT LAUDERDALE FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP FT. LAUDERDALE FL 33304

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS 4750 N.E. 25TH AVENUE

2.4 CITY-ST-ZIP FT. LAUDERDALE FL 33308

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-6-99

(954) 564-2251

CR2E034 (11/98)

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