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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27, 1999 8:00am

Secretary of State

Katherine Harris

Secretary.of State DIVISION OF CORPORATIONS

 Corporation 	MENT # H74736 LE'S APPLIANCE SERVICE, I						
Principal Place of Business Mailing Address							11411 41611 1941
14695 97TH ROAD NORTH 14695 97TH ROAD NORTH							
WEST PALM BEACH FL 33412 WEST PALM BEACH FL 33412						•	
		•			DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualifed 08/28/1985		
2. Principal F	Place of Business	2a. Mailing Address	Mailing Address		4. FEI Number	Ap	plied For
21	•	26		59-2595821	No	t Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			E. Contifered of Status Desired	\$8.75	Additional
27					5. Certificate of Status Desired	Fee Re	quired
City & Sta	te	City & State	City & State		6. Election Campaign Financing	\$5.00	Mav:Be
23	المعالم	28		Trust Fund Contribution Added to Fees			
Zip	Country Zip Cour			y	8. This corporation owes the current year	r Intangible	
24	25	29 ·	30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	red Agent	•
		:	81	Name			
ALE, JACK JACGAGOS 97TH ROAD NORTH				Street Addre	ess (P.O. Box Number is Not Acceptable)		
14000 07 111 110/10 110/1111				82 Street Address (P.O. Box Number is Not Acceptable)			
WEST PALM BEACH FL 33412				3		THE PROPERTY.	
					(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	[21] The State of the Control of the	(13): \$123: 1931
				City	· .	85 Zip (ode
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statute	s, the abov	/e-named corpo			registered
office or	registered agent, or both, in the State o am familiar with, and accept the obligati	f Florida. Such change was a	uthorized by	the corporation	oration submits this statement for the purpose of board of directors. I hereby accept the ap	pointment as re	gistered
agent. i a	am tamiliar with, and accept the obligati	ons of, Section 607.0303, Fior	iua Statute:	э.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered Age	ent signature required	when reinstating) -/ 52.75" DATE	<u> </u>	
12. OFFICERS AND DIRECTORS 1					ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	DP	. DELETE	1.1 TITLE		A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	☐ Change	☐ Addition
NAME	ALE, JOHN		1.2 NAME				
STREET ADDRESS	AACOE OZTU DOAD MODTU		1.3 STREE	ET ADDRESS	•		i
CITY-ST-ZIP	WEST PALM BEACH FL 33412		1,4 CITY-5				
TITLE	D	☐ DELETE	2.1 TITLE	VI-211		☐ Change	Addition
NAME	ALE, DEBRA		2.2 NAME			*1	
STREET ADDRESS	14695 97TH ROAD NORTH			ET ADDRÉSS			
	WEST PALM BEACH FL 33412	· · · · · · · · · · · · · · · · · · ·	2.4 CITY-				,
CITY ST-ZIP	WEGGT FIELD DENOTT E GOTTE	DELETE	3.1 TITLE	31-ZP		☐ Change	Addition
4 444.4	The state of the s	e.j.s	3.2 NAME			,	_ '
NAME . TV	新·金融基础等的表现。	A4.	- T				
CITY-ST-ZIP	Professional Control of the Control			TADDRESS		[1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	統統則
	.~	☐ DELETE	3.4. CITY- 4.1 TITLE	\$1-ZIP		☐ Change	
TITLE '	the state of the s			. '		_ 5590	
NAME	1 -	1.00	4. 2 NAME				
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP		□ Change	Addition
TITLE		DELETE	5.1 TITLE		national Secretary	Change	C Vacation (
NAME	•		5.2 NAME				}
STREET ADDRESS	Op.		P.	ET ADDRESS	1.3		
CITY-ST-ZIP	***	. □ netett	5.4 CITY-5		+ 1411 ST #1 * 1	Change	- Addition
7171 C	L. Box School C.	I I DELETE	# 61 IIII F			I IChanne	RIAGOITION

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP