**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # L57145**

1. Corporation Name

DEVIETAND CLEADING INC

•	
Principal Place of Business	Mailing
% JOHN E. DEKLE. III 22120 LUCKY LEE LANE ALVA FL 33920	% JOHN 22120 LL ALVA FL
2. Principal Place of Business	2a. Mail

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90109 048 \*\*\*150.00

DENLE L	AND CLEANING, INC.								
Principal Place	e of Business	Mailing Address			{	f d <b>e</b> driger men erner namen finer an	OI ESSE BEEST EST	KI WANDI NEBELI	BIĞIY GLEYLIYDI
% JOHN E. DEKLE. III % JOHN E. DEKLE. III 22120 LUCKY LEE LANE 22120 LUCKY LEE LANE					DO NOT WRF	TE IN THIS S	SPACE		
ALVA FL 33920		ALVA FL 33320				3. Date Incorporated or Qualifed 03/09/1990			
2 Principal P	lace of Business	2a. Mailing Address	-	-		4. FEI Number	•		pplied For
· ·	BENCHMARK AVENUE	26 1681 BENCHMA	RK AV	ENUE		65-0181960			ot Applicable
Suite, Apt.		Suite, Apt. #, etc.						\$8.75	Additional
SUITE City & State	F	27 SUITE F City & State		_		Certificate of Status Desired     Election Campaign Financing			equired May Be
	MYERS, FL	FORT MYERS,	ान			Trust Fund Contribution		•	to Fees
Zip Zip	Country	Zip	Coun	try		8. This corporation owes the curre	ent vear Inta	ngible	
33905		H 2000 - 1000 -	30 U.			Personal Property Tax.		<b>X</b> Xves	□No
<u>-4</u>   000 <u>00</u>	9. Name and Address of Current					10. Name and Address of New R	legistered A	gent	
				81 Name	DED.	LE, JOHN E. III			
DEKL	LE, JOHN E., III			B2 Street	DEK.	LE, JUHN E. III.	ible)		
2212	O LUCKY LEE LANE	`	l'	30 GGL /	168	I BENCHMARK AVENUE	SUITE	F	
ALVA	N FL 33920		Ī	B3					
			1					los Zin	Codo
				84 City	FOR	T MYERS,	FL	85 Zip.	Code 3905
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	if Florida. Such change was au	tnorizea	nv ine corbi	corpor oration	ation submits this statement for the 's board of directors. I hereby accep	purpose of control the appoint	hanging its tment as re	s registered egistered
agent. I a	m tamiliar with, and accept the obligati	ons of, Section 607.0505, Fior	da Statui	ies.					Į
agent. i a SIGNATURE					required w	when reinstating)	DATE	_	}
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE:		les. Agent signature n		ADDITIONS/CHANGES TO OF			
_	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	Agent signature n	D/	ADDITIONS/CHANGES TO OF P/T		DIRECTO	ORS IN 12
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP DEKLE, JOHN E. III 22120 LUCKY LEE LANÉ ALVA FL	and title if applicable. (NOTE: D DIRECTORS	13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CIT	Agent signature in  E  AE  REET ADDRESS  Y-ST-ZIP	D/ DE 16	ADDITIONS/CHANGES TO OF P/T KLE, JOHN E. III 81 BENCHMARK AVENU	FICERS ANI	Change EF	Addition
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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 occurate 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 of 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 appear with an address, with all other like empowered.

SIGNATURE:

ŢijŎĦŊĿ∭DĿĸĿ III, PRES.

(941) 337-3731