FILED

Mar 29, 1999 8:00 am Secretary of State

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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**

DOCUMENT # L95560

1. Corporation Name

DEUSON	LE CONSTRUCTION COMPA	W				
Principal Place of Business Mailing Address					i implimis mis imist millin ditte prizt antre distri distri distri distri distri distri	1961
1100 NE 45TH STREET 1100 NE 45TH STREET						
FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334		FT. LAUDERDALE FL 33334			DO NOT WEST IN THE CRACE	
US US					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed 08/14/1990	Į.
O. Daining District District Address					4. FEI Number Applied F	
<u> </u>		2a. Mailing Address	7		65-02 19745 Not Applied	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Addition	
22		27			5. Certificate of Status Desired	
City & State		City & State			-6. Election Campaign Financing \$5.00 May B	e====
23		28			Trust Fund Contribution Added to Fees	
Zip Country		Zíp	Zip Country		8. This corporation owes the current year Intangible	
24	4 25 29 30		0		Personal Property Tax. ☐ Yes ☐ No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
DELICOURE (AV			81	Name		
DEUSCHLE, JAY 1100 NE 45TH STREET			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
FORT LAUDERDALE FL 33334						
FURI LAUDERDALE PL 33334			83			
			84	City	FL 85 Zip Code	
11 Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes, the above						red
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: Ro	egistered Ager	nt signature requir	ired when reinstating) DATE	_
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	CP	☐ DELETE	1.1 TITLE		☐ Change ☐ A	Addition
NAME	DEUSCHLE, JAY B		1.2 NAME			
STREET ADDRESS	.		1.3 STREE	TADORESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33334		1.4 CITY-S	T-ZIP		
TITLE	1 DELETE		2.1 TITLE		Change A	Addition
NAME	DEUSCHLE, JULIE		2.2 NAME			
STREET ADDRESS			2.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33334		2. 4 CITY-5	ST-ZIP	Change A	ddition
i mle	S DELETE		3.1 TITLE	-		Димон
NAME	BURROWS, MARGARET		3.2 NAMÉ			
STREET ADDRESS	2074 NW 43RD TERRACE #6			TADDRESS		
CITY-ST-ZIP	LAUDERHILL FL	☐ DELETE	3.4. CITY+S 4.1 TITLE	ST-ZIP	Change A	Addition
TITLE		LI DECE IE				
NAME			4, 2 NAME	T ADDRESS		
STREET ADDRESS						
C/TY-ST-ZIP		DELETE	4.4 CITY-S 5.1 TITLE	1-217	· Change .	Addition
NAME			5.2 NAME		, _	
STREET ADDRESS			5.3 STREE	TADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZiP	÷	
TITLE	- AF-97-7 .	☐ DELETE	6.1 TITLE		☐ Change ☐ A	Addition
NAME			6.2 NAME			
		•	63 STREE	TADDRESS		

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.

6.4 CITY-ST-ZIP

SIGNATURE:

Cay Deuschle, Pres.

3/26/99

954-942-0348