## 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 # P92000010621

1. Corporation Name

**DEVETTE CORPORATION** 

## Feb 08, 1999 8:00 am Secretary of State

02-08-1999 90047 025 \*\*\*150.00



Principal Plac	ce of Business	Mailing Add	Iress			1 1004110	181 119 191FB 1191F EB			STRUCT FOR THE	
9255 S.W. 69RD STREET MIAMI FL 33173			9255 S.W. 63RD STREET MIAMI FL 33173			•					
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ļ						3. Date Incorp	porated or Quali				1
	•					12/10/19	192				ĺ
2. Principal F	Place of Business	2a. Mailing /	Address			4, FEI Numbe			(Ap	plied For	l
21		26				65-0375	167		No	t Applicable	ĺ
Suite, Apt.	. #, etc.	Suite, Ap	pt. #, etc.						\$8.75	Additional	İ
22		27				5. Certificate (	of Status Desire	d 🗆	Fee Re	equired	
City & Stat	te	City & S	tate			6. Election Ca	mpaign Financi	ng 🗆	\$5.00	May Be	l
23		28				Trust Fund	Contribution		Added t		l
Zip	Country	Zip	_	_ Country	•	8. This corpor	ation owes the	current year			l
24	25	[29]	30	<u>)                                    </u>			roperty Tax.		Yes	<b>200</b>	
	9. Name and Address of	f Current Registered Age	ent	- 04	1 81	10. Name and	Address of Ne	w Registere	d Agent		ļ
SAC	KS, YVETTE			81	Name						i
	5 S.W. 63RD STREET			82	Street Add	lress (P.O. Box Nur	nber is Not Acc	eptable)			ı
	MI FL 33173					Pr	**** * * * ***				i
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				84	City	***	- 1	*********	. 85 Zip C	Code	
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11. Pursuant	to the provisions of Sections	e State of Florida, Such c	Flonda Statutes, rhande was auth	une above	e-named corp	poration submits thi	s statement for	ine purpose	cietment on se	nictored	
11. Pursuant office or ragent. I a	registered agent, or both, in the familiar with, and accept the	ne State of Florida. Such co ne obligations of, Section 6	Florida Statutes, change was autho 507.0505, Florida	orized by Statutes	e-named corp the corporation	ion's board of direct	tors. I hereby a	cept the app	ointment as rec	gistered	
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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 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: