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

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P93000045938

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED Apr 08, 1999 8:00 am Secretary of State Katherine Harris Secretary of State

04-08-1999 90093 025 ***150.00

1. Corporation	DE DOCKS & LIFTS, INC.				
Principal Place	e of Business	Mailing Address			I ANDRE ON THE INTERPRETATION OF THE PROPERTY
.2061_ROOKERY	*	2061 ROOKERY BAY DR			
APT 2206	Court said the second to the second	APT 2206	~~~. * ~ ~ @	DO NOT-WRITE IN-THI	S.SPACE: Serving
NAPLES FL 34114 US US US				3, Date Incorporated or Qualifed	O O I AGE
03		00		06/22/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 205	N.CollierBlvd.	26 (.1) .BU 2	488	65-0413605	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		. City & State	1 =1	6. Election Campaign Financing	\$5.00 May Be
23 34	<u> </u>	28 MARCO ISLAN	Country	Trust Fund Contribution	Added to Fees
Zip	Country Collier	29 Zip 34/46-248830		This corporation owes the current year in Personal Property Tax.	Teanguele ✓ Yes □ No
24	9. Name and Address of Current			10. Name and Address of New Registered	Agent
			81 Name		_
WIERBACK, EDWARD J JR			82 Street Add	tress (P.O. Box Number is Not Acceptable)	
1323 DERBYSHARE CT #A-202					
NAP	LES FL 33999		83		
			84 City	F	85 Zip Code
44-5	4 11	and 607 1609 Elerido Statutos	the above named cor	paration culmits this statement for the purpose (of changing its registered
agent. I a	m familiar with, and accept the obligati	and title if applicable. (NOTE: Reg	STATUTES.		
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	D Wierback, Edward J Jr	□ DECEIE	1.2 NAME	lina A. Wierback 205 N. Collier Blvd. S MARCO Island, FL 34	, , , , , , ,
NAME	JOSE DEDOVOLIADE OF #4 000		1.3 STREET ADDRESS	205 N. Collier Blvd.	suite 233
STREET AODRESS	NAPLES FL 33999		1.4 CITY-ST-ZIP	MADCO ISLAND, FL 34	145
CITY-ST-ZIP	HALLES I E SOSSS	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		ļ
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS	:		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Channe D Addition
TITLE	1	☐ DELETE	4,1 TITLE		☐ Change ☐ Addition ☐
NAME	1		4.2 NAME		Ì
STREET ADDRESS	1 .		4.3 STREET ADDRESS		
CITY-ST-ZIP		[] DELETE	4.4 C/TY-ST-ZIP		☐ Change ☐ Addition
TITLE .:		المالية المالية	5.2 NAME		
NAME STREET ADDRESS	The thirt of the State of the S		5.3 STREET ADDRESS		
CITY-ST-ZIP	(i) so in the single		5.4 CITY-ST-ZIP		}
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	1		6.2 NAME		ļ
STREET ADDRESS	· ·		6,3 STREET ADDRESS		:
1	1 .		6.4 CITY-ST-ZIP		ļ

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: