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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000017524 (7)

## FILED May 26 1998 8:00am Secretary of State

	DESROULEAUX, P.A.				
Principal Place of Business Mailing Address					
1825 FOREST HILL BLVD. 13679 GREENTREE TRAIL #104 WELLINGTON FL 33414					
LAKECLARKE SHORES FL 33406				DO NOT WRITE IN TH	IS SPACE
U\$				3. Date Incorporated or Qualified	
		1 1 1375 173 173		03/07/1994	<del></del> -
	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
Suite, Apt	# oto	Suite, Apt #, etc.		65-0472493	Not Applicab \$8.75 Additional
22	r, otc.	27		5. Certificate of Status Desired	Fee Regulred
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Žip	Country	8. This corporation owes or has paid the	current year Intangible
24	25		30	Personal Properly Tax due June 30.	Yes No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registers	d Agent
	ESROULEAUX, LESLY		81 Name		
	1679 GREENTREE TRAIL		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
. WI	ELLINGTON FL 33414		00		
			83		
			84 City	F	85 Zip Code
SIGNATURE	Signature, type firm period manal of roge 5 or 1 a.		Registered Agent signature reque	poration submits this statement for the purpose tion's board of directors. I hereby accept the a cred when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	-
TITLE	T D	DELEIE	1.1 1/1/16	ADDITIONS/CHAINGES TO OFFICERS A	Change Addition
NAME	DESROULEAUX, LESLY		1.2 NAME		
STREET ADDRESS	13679 GREENTREE TRAIL		13 STREET ADDRESS		
CITY-ST-ZIP	WELLINGTON FL 33414		1.4 CHY-51-7(P		
TITLE	PVST	☐ DELETE	2.1 TITLE		Change Addition
NAME	DESROULEAUX, LESLY		2.2 NAME		
STREET ADDRESS	13679 GREENTREE TRAIL		2.3 STREET ADDRESS		
CITY-ST-ZIP	WELLINGTON FL 33414		2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 THILF		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	<del>-</del>	DELETE	3.4 CHY-ST-ZIP		☐ Change ☐ Additio
NAME		نے الدداد	4.1 TILE 4.2 NAME	annnnesst.	
STREET ADDRESS			4.3 STREET ADDRESS	-05/26/9801057r	21
CITY-ST-ZIP			4.4 CITY - S1 - 7IP	9000025351 -05/26/98010570 ***550.00	
TITLE		DELETE	51 1/ILE		Change Addition
NAME			5.2 NAMF		115/5.
STREET ADDRESS			5 3 STREET ADDRESS	<	4Mdlo
CITY-ST-ZIP			5.4 C(1)Y-S1-2(P		$\nu'$
TITLE		☐ DELETE	6.1 T(I) (F		Change Additio
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
	<b>√</b>		U d STREET ADDRESS		
CITY - ST - ZIP			64 CITY-S1-ZIP	Section 119.07(3)(i). Florida Statutes. I further	

4. I bereby 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 supplicitional report is supplicit and report is supplicit and report is supplied with that I am an officer or director of the corporation or the receiver or trusted only lowered 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 maddress.

LESAY DUSROULEAUX

deworth L

5-1-98

561-434-455