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

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90066 019 ***150.00

DOCUMENT # P95000021726

1. Corporation Name

DENICOURT ENTERPRISES, INC.

Principal Place of Business Mailing Address							HA ISAAL İTAN SERI	1 14010 0141 1001	
326 MINNESOTA ST. HOLLYWOOD FL 33019 326 MINNESOTA ST. HOLLYWOOD FL 33019						DO NOT WRITE IN TH	IIS SDACE		
						3. Date Incorporated or Qualifed 03/16/1995	IS SPACE		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
21 26						65-0564332	N	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired			Additional equired		
City & State City & State						Election Campaign Financing Trust Fund Contribution	, , , , , , , , , , , , , , , , , , , ,		
Zip 24	Country Zip 29 30			ountry				X INo	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registere	d Agent		
DEAL	IOOLIDE LANGENIE			81	Name		•		
DENICOURT, VINCENT 326 MINNESOTA ST.				82	Street A	ddress (P.O. Box Number is Not Acceptable)	·	···	
				Joe Greek A		address (F.O. Box Nulliber is Not Acceptable)			
HOL	LYWOOD FL 33019			83					
				84	City	F	85 Zip	Code `-	
office or n		of Florida. Such change v	as authoriz	ed by	the corpor	corporation submits this statement for the purpose ration's board of directors. I hereby accept the app	of changing its		
SIGNATURE	Signature, typed or printed name of registered age		MOTE B			DATE	•		
12.		ND DIRECTORS	NOTE: Registe		it signature rec	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	DC IN 12	
TITLE	D	DELET		J. I TITLE	1	ADDITIONS/CHANGES TO OFFICERS /	Change	☐ Addition	
NAME	DENICOURT, SUZANNE			NAME	İ			_ · ·	
STREET ADDRESS	326 MINNESOTA ST.				ADDRESS		-		
	HOLLYWOOD FL 33019								
CITY-ST-ZIP TITLE	D	☐ DÉLET		CITY-\$1	1-ZIP	:	Change	Addition	
NAME	DENICOURT, VINCENT			NAME		ė .			
STREET ADDRESS	326 MINNESOTA ST.				ADDRESS				
	HOLLYWOOD FL 33019					i de la composición del composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la compos	·		
CITY-ST-ZIP TITLE	110111111000 1 1 30019	☐ DELET	_	4 CITY-S	1-ZP		☐ Change	☐ Addition	
		□ becei					The cuttinge	☐ Addition	
NAME				NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		[] pc: c7		L CITY-S	T-ZIP				
TITLE		DELET	⊏ ■ 4.1	TITLE	!		☐ Change	Addition	

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

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ Addition

☐ Addition

☐ Change

Change