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FILED
Jan 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000025443 (8)

1. Corporation Name
DEVKEN, INC.



Principal Place of Business

Mailing Address

~~7041 NW 44 LANE~~
~~COCONUT CREEK FL 33073~~

US 5862 EAGLE CAY CIRCLE
COCONUT CREEK, FL 33073
US

~~7341 NW 44 LANE~~
~~COCONUT CREEK FL 33073~~

US 5862 EAGLE CAY CIRCLE
COCONUT CREEK, FL 33073
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 5862 EAGLE CAY CIRCLE

Suite, Apt. #, etc.

22

City & State

23 COCONUT CREEK, FL

Zip

24 33073

Country

25 US

2a. Mailing Address

26 5862 EAGLE CAY CIRCLE

Suite, Apt. #, etc.

27

City & State

28 COCONUT CREEK, FL

Zip

29 33073

Country

30 US

3. Date Incorporated or Qualified

03/18/1996

4. FEI Number

65-0649357

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WILLIAMS, STEPHEN G
2850 NE 52ND ST
LIGHTHOUSE POINT FL 33064-7052

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME BEATTY, VINCENT S
STREET ADDRESS ~~7041 NW 44 LN~~ 5862 EAGLE CAY CIRCLE
CITY-ST-ZIP ~~COCONUT CREEK FL~~ COCONUT CREEK, FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 in the attachment with an address.

SIGNATURE:

[Handwritten Signature]

CR2E034 (10/97)