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

PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000103945 (7)

LISACUL CONSTRUCTION CO.

FILED

97 JUN 27 AM 5: 47

SECRETARY OF STATE TALLAHASSEE, FLORIDA



						#1817 #1818 # (1418 1917) B1881 B181 1481
Principal Place of Business Mailing Address				a santinari tila saita Abris annis Antis annin trati antina siste saiti dinas abis 1000		
727 VILLAGE ROAD N PALM BEACH FL 33486		727 VILLAGE ROAD N PALM BEACH FL 33408-3331				
					 Date Incorporated or Qualified 12/23/1996 	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing /	Address			4. FEI Number	Applied For
21 2107 Bellement		26 2103 34/14 mean Array Suite, Apt. #, otc. 27 House form, Mr. 13033 City & State			58-2302471	Not Applicabl
Suite, Apt. #, etc.	·				5. Certificate of Status Desired \$8.75 Additional	
22 #9060 town City & State					Fee Required	
23	28	ate			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Cour		T	Country		8. This corporation has liability for in	
	loume 29	30	•			Yes No
g, Name and Add	fress of Current Registered Age				10. Name and Address of New Reg	sistered Agent
MOUSE, JOHN M			B1	Namo		
727 VILLAGE ROAD				Street Ado	fress (P.O. Box Number is Not Acceptable	le)
N PALM BEACH FL 323	303			0.10017100	mess (.c. box Heribal is Het /ledeptach	<u></u>
*			83			
			84	City		85 Zip Code
					poration submits this statement for the p	
Agr iter, typed or printed n	amo of registered byen and title if applicable OFFICERS AND DIRECTORS		natered Age	nt signature requ	ored when reinstating) ADDITIONS/CHANGES TO OFFIC	
TITLE Presed			1.1 TITLE		ADDITIONS/CHANGES TO GITTE	Change Additio
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CITY-ST-ZIP	Your Ma 220	50	1.4 CITY-S	1-2IP	****** 185	nn *****165.00
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NAME			2.2 NAME]		
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			3.3 STREE!	- 1		
GIFF-SI-ZII			34. CITY-5	ST - ZIP		Channa Laussia
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CITY-ST-ZIP TITLE			4.4 CITY - S 5.1 TITLE	I-ZIF		Change Addition
NAME	-		5.2 NAME		$\langle 1 \rangle$	0gv
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TITLE			6.1 TITLE			☐ Change ☐ Addition
NAME		1	6.2 NAME			. –
STREET ADDRESS		ļ	63 STREET	AUDRESS		
CITY-S1-ZIP			6.4 CHY-S	T- 7(P		
						·

14. I do hereby certify that the information supplied with this filing closs 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.