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

DOCUMENT # P97000099618 1. Corporation Name A SEAWALL INSPECTION SERVICE, INC.

FILED Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90033 044 ***150.00



Principal Place	e of Business	Mailing Addre	ess					# 1#311 1##UL ##UL #	888 88 88 8 8 88 9		11001 1011 1001
2215 SOUTH FEDERAL HIGHWAY		2215 SOUTH FEDERAL HIGHWAY									
SUITE 20		SUITE 20					DO NOT WRITE IN THIS SPACE				
FT LAUDERDALE FL 33316		FT LAUDERDALE FL 33316			<u> </u>	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
						'	11/24/1997		l		
2 Dringing D	lace of Rusiness	2a. Mailing Ad	ddress				4. FEI Number	60196	1-1-9	, V	plied For
2. Principal Place of Business 21 ZT IS LA BARIA DIUJE		2a. Mailing Address					APPLIED F	UB L	GGI	<u> </u>	ot Applicable
ا <u>کر ایل 21 </u> Suite, Apt.		Suite, Apt	. #. etc.				· · · · · · · · · · · · · · · · · · ·				Additional
22 - Vi- LiA	MECANICE FL.	27 =	~~~	بر منت برم		~ ~ =	5. Certifcate of S	tatus Desired		Fee Re	equired
City & State		City & Sta	ate				6. Election Camp	aign Financing		\$5.00	May Be
23 3331	AZU J	28	_				Trust Fund Co	ntribution		Added	to Fees
Zip	Country	Zip		Country	ý	1	8. This corporation	on owes the cur	rent year Inta		П.,
24	25	29	30	0			Personal Prop	-		Yes	□No
	9. Name and Address of Curren	t Registered Age	nt	-		11	0. Name and Ad	dress of New	Registered /	Agent	
A145	DIL AMOVED			81	Name						
	rilawyer Almeria avenue		•	82	Street A	Address	(P.O. Box Number	er is Not Accept	iable)	÷	
	IAL GABLES FL 33134			83			٠.				F 1 4 2
0011	THE CARDLES I E SO IST			00	´l				in the		** <u>1</u>
				84	City		•	J. 15, 45. 1	FI.	85 Zip	Code
	to the provisions of Sections 607.0500	0 1 CO7 4500 E	lorida Statutes.	the abov	/e-named c	corporati	ion submits this s	tatement for the	purpose of	t changing its	registered
ri. Fursuain	to the provisions of Sections 607.050. egistered agent, or both, in the State of	of Florida, Such ch					hoard of directors	s. I hereby acce	of the appoir	ntment as re	gistered
office or n	egistered agent, or both, in the State	or Florida. Such Co	nange was auu	offized by	/ the corpor	ration s	Dogid of directors		P		- 1
agent. I a	egistered agent, or both, in the State of members and accept the obligation of the state of the	tions of Section 60	07.0505, Florid	a Statutes	/ the corpor	ration s	poard of directors		,p. v.o eppo		
agent. I a	m familiar with, and accept the obligat المائة ا	tions of Section of	у/.0505, Flond	a Statutes	tne corpors.				DATE		
agent. I a	m familiar with, and accept the obligat	tions of Section of	у/.0505, Flond	a Statutes	/ the corpor			· <u>-</u>	DATE	•	
agent. I a	m familiar with, and accept the obligat	tions of Section 60 and title if applicable. D DIRECTORS	у/.0505, Flond	a Statutes	tne corpors.		en reinstating)	· <u>-</u>	DATE	•	
agent. I a SIGNATURE 12.	m familiar with, and accept the obligation of th	tions of Section 60 and title if applicable. D DIRECTORS	у/.0505, Flond (NOTE: Re	egistered Age	y the corpor s.		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12
agent. I a SIGNATURE 12. TITLE	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W	tions of, Section 60	у/.0505, Flond (NOTE: Re	egistered Age 13. 1.1 TITLE 1.2 NAME	y the corpor s.		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W	tions of, Section 60	у/.0505, Flond (NOTE: Re	egistered Age 13. 1.1 TITLE 1.2 NAME	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 ☐ Addition
agent. I a SIGNATURE 12. THLE NAME	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW	it and title if applicable. D DIRECTORS	у/.0505, Flond (NOTE: Re	egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	y the corpor s. ent signature rec ET ADORESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS	(NOTE: R	egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 ☐ Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA	it and title if applicable. D DIRECTORS	(NOTE: R	egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 ☐ Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA	it and title if applicable. D DIRECTORS	(NOTE: R	egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW	it and title if applicable. D DIRECTORS	(NOTE: R	egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 ☐ Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW	it and title if applicable. D DIRECTORS	(NOTE: RE	a Statutes egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW	it and title if applicable. D DIRECTORS	(NOTE: RE	a Statutes egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW	it and title if applicable. D DIRECTORS	(NOTE: RE	a Statutes egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW	it and title if applicable. D DIRECTORS	(NOTE: RE	egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE	ent signature rec ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO	DRS IN 12 Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW	it and title if applicable. D DIRECTORS	(NOTE: RE DELETE DELETE	egistered Age 13. 1.1 TITLE 12 NAME 1.3 STREE 14 CITY-5 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 32 NAME 3.3 STREE 3.4 CITY-	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS	(NOTE: RE DELETE DELETE	a Statutes egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 3.2 NAME 3.3 STREE 3.4 CITY-1 4.1 TITLE 4.2 NAME	ent signature rec		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS	(NOTE: RE (NOTE: RE) DELETE DELETE	a Statutes egistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 3.2 NAME 3.3 STREE 3.4 CITY-1 4.1 TITLE 4.2 NAME	ent signature rec ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ET ADDRESS		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change Change	DR\$ IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS	(NOTE: RE DELETE DELETE	a Statutes egistered Age 13. 1.1 ITILE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 ITILE 2.2 NAME 2.3 STREE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 ITILE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 ITILE 5.1 ITILE	ent signature rec ET ADDRESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change	DRS IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS	(NOTE: RE (NOTE: RE) DELETE DELETE	a Statutes segistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 3.3 STREE 3.4 CITY-4 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-5 5.1 TITLE 5.2 NAME	ent signature rec ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change Change	DR\$ IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS	(NOTE: RE (NOTE: RE) DELETE DELETE	a Statutes **postered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 S	ent signature rec ET ADDRESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change Change	DR\$ IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS /AY	(NOTE: RE (NOTE: RE) DELETE DELETE DELETE	a Statutes **sistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-1 5.1 STREE 5.3 STREE 5.4 CITY-1	ent signature rec ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS /AY	(NOTE: RE (NOTE: RE) DELETE DELETE	a Statutes popistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-1 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-1 6.1 TITLE 6.1 TITLE	ent signature rec ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change Change	DR\$ IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AN PD SCHAFER, PAUL W 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316 VSTD SCHECHTER-SCHAFER, JULIA 2215 SOUTH FEDERAL HIGHW FT LAUDERDALE FL 33316	it and title if applicable. D DIRECTORS /AY	(NOTE: RE (NOTE: RE) DELETE DELETE DELETE	a Statutes popistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE 3.2 NAME 3.3 STREE 4.2 NAME 4.4 CITY-1 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-1 6.1 TITLE 6.2 NAME	ent signature rec ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		en reinstating)	· <u>-</u>	DATE	D DIRECTO Change Change Change	DRS IN 12 Addition Addition 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 recurrate 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 attainment with an address, with all other like empowered.

SIGNATURE: