

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 07, 1999 8:00 am
Secretary of State

09-07-1999 90005 025 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000055368

Corporation Name
LEQUILE, INC.



Principal Place of Business Mailing Address
 5671 THORNBLUFF AVE. 5671 THORNBLUFF AVE.
 DAVIE FL 33331 DAVIE FL 33331

DO NOT WRITE IN THIS SPACE

Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
5671 THORNBLUFF AVE. DAVIE FL 33331		5671 THORNBLUFF AVE. DAVIE FL 33331		06/18/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				65-0884328	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> - \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip Country		Zip Country		8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	
25		29			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
VENTUROSO, GIUSEPPE 5671 THORNBLUFF AVE. DAVIE FL 33331				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

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 reinstating)		DATE	
OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
D <input type="checkbox"/> DELETE		VENTUROSO, GIUSEPPE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
ST-ADDRESS		5671 THORNBLUFF AVE.		1.2 NAME			
ST-ZIP		DAVIE FL 33331		1.3 STREET ADDRESS			
				1.4 CITY-ST-ZIP			
				2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				2.2 NAME			
				2.3 STREET ADDRESS			
				2.4 CITY-ST-ZIP			
				3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				3.2 NAME			
				3.3 STREET ADDRESS			
				3.4 CITY-ST-ZIP			
				4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				4.2 NAME			
				4.3 STREET ADDRESS			
				4.4 CITY-ST-ZIP			
				5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				5.2 NAME			
				5.3 STREET ADDRESS			
				5.4 CITY-ST-ZIP			
				6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				6.2 NAME			
				6.3 STREET ADDRESS			
				6.4 CITY-ST-ZIP			

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 with an address.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** 9-3-99
 Date Daytime Phone #

007/108/01

CR2E034 (5/99)

Lequile, Inc.
5671 Thornbluff Avenue
Davie, Florida 33331
954/557-7297

P98000055368
612-727-9004-25

September 3, 1999

Florida Department of State
Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, Florida 32303-1500

Re: Lequile, Inc.
Document # P98000055368


Dear Sir/Madam:

Pursuant to a conversation with one of your employees today I have attached my check in the amount of \$150.00 to cover filing fees for the Subject Company.

Please keep in mind that I did not receive the first notice that was sent to us. I am grateful for your understanding in this matter and certainly appreciate you processing this for the agreed upon fee enclosed.

Please contact me directly with any questions or comments that you may have.

Sincerely,



Giuseppe Venturoso
President