FILE NOW: FILING FEE A	AFTER MAY 1ST IS	\$550.00		Py. 142
PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPART Katherine Secretary DIVISION OF CO	e Harris – /	APPROVED AND FILED	
DOCUMENT # P980000 76810 1. Corporation Name			00 JUL 13 PM 3:50	
Housen Inspection Inc.			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business Mailing Address			1	
·	_	NT LANE	DO NOT INDITE IN T	HO ODACE
2917 BELMONT LANE 2917 BELMONT LANE COOPER CITY FL 83826 COOPER CITY FL 33026			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifel 3. 4 98	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
i i	26			Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country [25] 9. Name and Address of Currer	Zip 29 30 TRegistered Agent	Country 0	8. This corporation owes the current year Personal Property Tax. 10. Name and Address of New Register	☐Yes ☐No
		81 Name		
OLAIGBE OLA		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
18841 NW 2 NO AVE		83		
SUITE 220		84 City	85 Zip Code	
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	of Florida. Such change was auth	, the above-named corporation	protion submits this statement for the numose	of changing its registered pointment as registered
SIGNATURE DEVON Housin	DEVON HOUSEN	,	1-6	·- B ()
Signature, typed or printed name of registered age		egistered Agent signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE P DOUDD HOUSEN	ID DIRECTORS	13.	ADDITIONS/OFFACES TO OFFICE AS	Change Addition
TITLE P DEVON Housen NAME Z917 Belmon STREET ADDRESS COOPER City IFI	it ln	1.2 NAME 1.3 STREET ADDRÉSS	700003349 -08/08/00	92474
CITY-ST-ZIP COOPER City 1H	330CG	1.4 CITY-ST-ZIP	****150_00	****150.00
TITLE	☐ DELETE	2.1 TITLE 2.2 NAME	700000044	
NAME STREET ADORESS		2.3 STREET ADDRESS	700003345 -08/08/00	-01042020
CITY-ST-ZIP	°	2.4 CITY-ST-ZIP	****150.00] *** *150.00
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	·	4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	["] bei fire	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
MILE 13	DELETE	5.1 TITLE 5.2 NAME	1 1	
NAME CORRECT ADDRESS		5.3 STREET ADDRESS	1/1/1/	\setminus / \mid

6.4 CITY-ST-ZIP 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 on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

☐ Change

Addition

Pa. Zal Z

Devon Housen 2917 N Belmont Lane Cooper City, FL 33026 February 16, 2000

To Whom It May Concern:

I Devon Housen send my documents in for the Housen Inspection Inc, but they were sent back saying I have not send in a letter of waiver.

To my knowledge I have not received a "99" annual report and I am asking If you could please waive the penalty fees regarding my documents any questions please feel free to call me at (954) 441-9897.

Thank you,

Devon Housen