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

PROFIT CORPORATION 2 ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # V72710

1, Corporation Name PINNACLE CONSTRUCTION OF FORT LAUDERDALE, INC.

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90006 032 ***158.75



Principal Place of Business Mailing Address					T (EON) BYIOTI 100% BYIOTI (COOK) (SOOK) (SOOK) SOOK BYIOTI OLEKY OLIGIN OLIGIN OLIGIN OLIGIN ALAN OLIGIN ALAN
2715 E OAKLAN PARK BLVD 3706 N. OCEAN BLVD.					
SUITE 100 SUITE 460 FT LAUDERDALE FL 33306 FT, LAUDERDALE FL 33308					DO NOT WRITE IN THIS SPACE
FT LAUDERDALE FL 33306 FT. LAUDERDALE FL 33308 US					3. Date Incorporated or Qualifed
					10/20/1992
*2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21			= <u>i</u>		65-0376370 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
27				5. Certificate of status besited Fee Required	
City & State City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28	== :		Trust Fund Contribution Added to Fees
Zib			∵Countri T	,	8. This corporation owes the current year Intangible Personal Property Tax.
24 25 29 30					Personal Property Tax Yes No 10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent				Name	10. Name and Address of New Registered Agent
LESOUSKY, JOHN			Ĺ		· ·
3706 N. OCEAN BLVD.			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
SUITE 460			83	 -	
FT LAUDERDALE FL 33308				<u> </u>	
			84	City	FL 85 Zip Code
44 Purcuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abov	e-named co	ornoration submits this statement for the purpose of changing its registered
office or r	egistered agent or both in the State o	at Florida. Such change was auth	ionzed by	/ the corpora	ation'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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	LESOUSKY, MICHAEL 128		1.2 NAME		
STREET ADDRESS	3706 N. OCEAN BLVD., STE. 4	160	1.3 STREE	TADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-5	ST-ZIP	
TITLE	· · · · · · · · · · · · · · · · · · ·		2.1 TITLE		☐ Change ☐ Addition
_NAME	LESOUSKY, JOHN 222 N		2.2 NAME		•
STREET ADDRESS	3706 N. OCEAN BLVD. STE.	160	2.3 STREE	T ADDRESS ~	- Aller - Alle
CITY-ST-ZIP	01 211		2.4 CITY-	ST-ZIP	
TITLE	_		3.1 TITLE		☐ Change ☐ Addition
-NAME	LEGODOKI, GOING		-3.2 NAME		
STREET ADDRESS	• • • • • • • • • • • • • • • • • • •			TADDRESS	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	☐ Change ☐ Addition
TITLE			4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP		Cl oci etc	4.4 CITY-	ST-ZIP	Change Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	Ì	C annual D Manager
NAME			ľ	T ADDRESS	
STREET ADDRESS			5.4 CITY-:		
CITY-ST-ZIP		DELETE	6.1 TITLE	J1/4IF	Change Addition
TITLE	}	€ Defeie	6.2 NAME	}	
NAME				T ADDRESS	
STREET ADDRESS			6.4 CITY-		
CITY OT 7ID	1		= v vii (*:	,	,

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR