PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 499088

1. Corporation Name

SUNCRAFT ENGINEERING AND CONSTRUCTION CORPORATIO

Principal Place of Business	Mailing Address
3308 HORSHOE DRIVE LONGWOOD FL 32779	3308 HORSHOE D LONGWOOD FL 3

FILED Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90026 024 ***150.00



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Principal Place	e of Business	M	failing Address									
3308 HORSHOE			308 HORSHOE DRIVE									
LONGWOOD FL	_ 32779	LC	ONGWOOD FL 32779				DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualifed					
							03/16/1976				- }	
2. Principal P	ace of Business	2a	, Mailing Address				4. FEI Number		\top	Applied For	\neg	
21		26					59-1655536			Not Applica	ble	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired 5. Service Sta				- 1	
22]						-	5. Certificate of Status Desired		Fee:	Required	≕	
City & State	9		City & State				6. Election Campaign Financing			0 May Be		
23		28					Trust Fund Contribution		Adde	d to Fees		
Zip	Country	ļ	Zip	Co∟	ntry		8. This corporation owes the current year Intangib					
24]	25	29	30				Personal Property Tax.				\dashv	
	9. Name and Address of Currer	nt Regi	stered Agent		81	Name	10. Name and Address of New Registere	u Agei	11.			
ROT	IC HELLA M				01	Name						
BOTIC, HELLA M. 3308 HORSESHOE DR.				82 Street Add			dress (P.O. Box Number is Not Acceptable)					
	GWOOD FL 32779				83							
LON	GWOOD I E GETTO				03							
					84	City	F	8	5 Z	p Code	}	
			007 (F00 F1 11 001)	4				of obor	naina	its registere	.	
11. Pursuant office or re agent. I as	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Flori ations o	ida. Such change was a f, Section 607.0505, Flo	es, the a uthorized rida Stat	bove i by utes	the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the app	ointme	nt as	registered		
SIGNATURE											1	
	Signature, typed or printed name of registered age				Agen	t signature requ	ADDITIONS/CHANGES TO OFFICERS	ND D	DEC	TORS IN 12	,	
12.	OFFICERS AN	ND DIRI	DELETE	13.	n c		ADDITIONS/CHANGES TO OFFICERS /		Chang			
TITLE	PD PDANIME		□ DECETE					_		_		
NAME	BOTIC, BRANIMIR 3308 HORSHOE DRIVE			1.2 N		ADDRESS					}	
STREET ADDRESS	LONGWOOD FL 32779											
CITY-ST-ZIP	S		☐ DELETE	1.4 U	TY-S	1-ZIP			Chang	je 🗌 Add	iition	
TITLE	BOTIC, HELLA M.			2.2 N							- 1	
NAME	3308 HORSHOE DRIVE					ADDRESS						
STREET ADDRESS	LONGWOOD FL 32779					T-ZIP			•		ļ	
CITY-ST-ZIP TITLE	V.		☐ DELETE	3.1 ∏		71-211			Chang	je 🗌 Add	lition	
NAME	BOTIC, BRYAN S.			3.2 N								
STREET ADDRESS	3308 HORSHOE DRIVE					ADDRESS					- }	
CITY-ST-ZIP	LONGWOOD FL 32779					T-ZIP						
TITLE	T		☐ DELETE	4.1 TI					Chang	ge ∐ Add	ition	
NAME	BOSTON, RODGER E.			4. 2 N	AME							
STREET ADDRESS	1001 OBSERVATORY CT.			4.3 \$	TREET	ADDRESS						
CITY-ST-ZIP	ORLANDO FL 32818			4.4 C	TY-S	T-ZIP						
TITLE			☐ DELETE	5.1 TI	TLE				Chang	ge ∐Add	lition	
NAME				5.2 N	ME						Ì	
STREET ADDRESS				5.3 S	REET	ADDRESS						
CITY-ST-ZIP					TY-S	T-ZIP						
TITLE			☐ DELETE	6.1 Ti					Chang	ge [] Add	TIGOLI	
NAME				6.2 N								
STREET ADDRESS	B. C. C. S.			6.3 S	REET	ADDRESS					Ì	

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.