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## 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 # F34776**

HERE CO	omes the sun-solar eni	ERGY, INC.		•						
Bringing Blace	of Business	Mailing Address				-  I 1891103 1188 13111 81831 19841 181		BIBLI BIBLI BI	TIL RIPH (OL)	
Principal Place of Business  Mailing Address  CHARLES REX BONE. JR  1063 SW 25TH PLACE BOYNTON BEACH FL 33426  Mailing Address  CHARLES REX BONE. JR  1063 SW 25TH PLACE BOYNTON BEACH FL 33426						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 05/14/1981				
2 Principal Pl	loos of Business	2a. Mailing Address			_	4. FEI Number		App	lied For	
2. Principal Place of Business 2a. Mailing Address 25						59-2092483		<del></del>	Applicable	
Suite, Apt.	Suite, Apt. #, etc.	ite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 Ac Fee Req			
22   27     City & State   City & State						6. Election Campaign Financing		\$5.00 N	May Re	
23	•	28				Trust Fund Contribution		Added to		
Zip	Country	Zip ·	Coun	try		8. This corporation owes the curr	ant year Intang	gible		
24	25	29 30	<u> </u>			Personal Property Tax.			□No	
	9. Name and Address of Current	Registered Agent		B1 Na	me	10. Name and Address of New F	egistered Ag	ent		
BONE, CHARLES REX, JR						O O Day Niverbas in Net Assessed	, hla			
1063 SW 25TH PLACE				<b>32</b> Str	eet Addre	ess (P.O. Box Number is Not Accepta	.ble)			
BOYNTON BEACH, FL			1	B3						
33426			ļ	B4 Cit	у		FL	85 Zip C	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the						ting a shorter this statement for the		onging its I	registered	
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	f Florida. Such change was auth	ionzed i	ov ine d	orporatio	n's board of directors. I hereby accep	it the appoints	nent as reg	istered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if anylicable (NOTE: Re	agistered A	oent signa	ture required	when reinstating)	DATE			
12,	OFFICERS ANI		13.	<b>y</b>		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	RS IN 12	
TITLE	PT	☐ DELETE	1.1 T/TL	E				Change	Addition	
NAME	BONE, CHARLES R, JR		1.2 NAM	Œ						
STREET ADDRESS	DRESS 1063 SW 25TH PLACE			EET ADDR	ESS					
CITY-ST-ZIP	BOYNTON BEACH, FL 00000		1.4 CIT	/-ST-ZIP						
TITLE	☐ DELETE 2.11		2.1 TITL	E	Į			Change	Addition	
NAME	. 221		2.2 NAM	Æ						
STREET ADDRESS	is 2		2.3 STR	EET ADOF	(ESS				Ì	
CITY-ST-ZIP		C) per ere	•	Y-ST-ZIP		and the state of t		Change	Addition	
TITLE			3.1 TITL			·				
NAME OTDEET ADDDESS			3.2 NAM	EET ADDR	eess					
STREET ADDRESS CITY-ST-ZIP			B	Y-ST-ZIP						
TITLE			4.1 TITL				[	Change	Addition	
NAME	•		4. 2 NA	ME					ļ	
\$TREET ADDRESS			4.3 STR	EET ADDF	RESS				ļ	
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP						
TITLE		☐ DELETE	5.1 TITL		.			Change	Addition (	
NAME			5.2 NA		.500					
STREET ADDRESS				EET ADDF	Œ\$\$					
CITY-ST-ZIP		<u> </u>		Y-ST-ZIP	_			Cheese	□ Addition	
TITLE		☐ DELETE	6.1 7171				l	Change	☐ Addition	
NAME.			6.2 NAI							
STREET ADDRESS	i '		■ 6.3 STR	EET ADD	(E5S					

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.

6.4 CITY-ST-ZIP

SIGNATURE: