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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H62601

SUN VILLAGE HOMES, INC.

Principal Place of Business

FILED Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90060 009 ***150.00



Mailing Address 1350/1360 W. 31ST STREET 1350/1360 W. 31ST STREET HIALEAH FL 33012 HIALEAH FL 33012 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/18/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 Applied For 26 59-2549544 Suite, Apt. #, etc. Not Applicable Suite, Apt. #, etc. 22 \$8.75 Additional 5. Certifcate of Status Desired 27 City & State Fee Required City & State 6. Election Campaign Financing 23 \$5.00 May Be 28 \Box Zip Trust Fund Contribution Country Added to Fees Country 8. This corporation owes the current year Intangible 24 25 29 30 Personal Property Tax. 9. Name and Address of Current Registered Agent ☐ Yes 10. Name and Address of New Registered Agent Name CARLSON, RUTH 1350 - 1360 W. 31 STREET 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 83 City 85 11. 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ure, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) (1) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 T/TLE CARLSON, RUTH NAME Change ☐ Addition 1.2 NAME 955 HUNTINGLODGE DR. STREET ADDRESS 1.3 STREET ADDRESS MIAMI SPGS. FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE ☐ DELETE 2.1 TITLE ☐ Change MME ☐ Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS TY-ST-ZIP 2. 4 CiTY-ST-ZIP TLE DELETE 3.1 TITLE ☐ Change IAME ☐ Addition 3.2 NAME TREET ADDRESS 3.3 STREET ADDRESS TY-ST-ZIP 3.4. CITY-ST-ZIP IΠF ☐ DELETE 4.1 TITLE 4. 2 NAME TREET ADDRESS 4.3 STREET ADDRESS TY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE Change ☐ Addition 5.2 NAME REET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP ΊE ☐ DELETE 6.1 TITLE Change . ME ☐ Addition 6.2 NAME REET ADDRESS

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

IGNATURE:

Y-ST-ZIP

CR2E034