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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L48404 1. Corporation Name

ST. LUCIE SUN CORPORATION

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Principal Place of Business Mailing Address							-	2) 0 0 0 0 0 0 0		i dibi bibi di	III. Bibil disii iddi
3080 N FEDERAL HIGHWAY 6211 SW 45TH ST FT PIERCE FL 34946 DAVIE FL 33314 US							DO NOT WRITE IN THIS SPACE				
							3. Date Incorp	porated or Qualif	ed		
							02/02/19	990			
2. Principal P	Place of Business	2a. Ma	ailing Address				4. FEI Numbe		*		Applied For
21		26					65-0178	838			Not Applicable
Suite, Apt.	#, etc.	Su	ite, Apt. #, etc.							\$8.7	Additional
27							5. Certificate o	of Status Desired		Fee	Required
			ty & State	State			6. Election Ca	ampaign Financin	9 n	: \$5.0	May Be
23	_	28					Trust Fund	Contribution			d to Fees
Zip	Country	- Zip)	Count	try		8. This corpor	ration owes the c	urrent year l	ntangible	. : <u>.</u>
24	25	29		30				roperty Tax.		Yes Yes	□No
	9. Name and Address of Curren	nt Registere	d Agent				10. Name and	Address of Nev	v Registere	d Agent	·
DIO	OUE DIM ID A			3	31 1	Name					
UISU	QUE, PHILIP A			1	32 3	Street Addres	ss (P.O. Box Nu	mber is Not Acce	ptable)		
	SE 3RD AVE, STE 400								r Comprae de espe		* ****
,	AUDERDALE FL 33316	•		8	33		2 1 1 2 1 1		翻稿於	19 1913	
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11. Pursuant	to the provisions of Sections 607.050)2 and 607.1	1508, Florida Statu	ites, the abo	ove-n	named corpor	'a board of direc	is statement for t	ne purpose o	of changing	its registered
	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations.					named corpor e corporation	n's board of direc	is statement for the stors. I hereby acc	ne purpose o cept the app	of changing ointment as	its registered registered
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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

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90041 029 ***150.00