FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

DO NOT WRITE IN THIS SPACE DOCUMENT # P060000 75553 1. Entity Name 11 BAY 27 AM II: 38 SUN STYLE DESIGN INC SECRE N. Y MESTATE YALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 10450 Suite, Apt. #. etc. Suite, Apt. #, etc. CR2E034B (1/11) City & State
St Petersbur Applied For Not Applicable \$8.75 Additional USA Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE Petersburg 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent McNanare Terrance P SIGNATURE_ January 1 - May 1 Fee is \$150.00 E-mail Address: 9. Election Campaign Financing ___ \$5.00 May Be After May 1, Fee is \$550.00 tpmac@sprunet.com E-mail address to be used for future annual report notices Amended AR is \$61.25 Trust Fund Contribution Added to Fees Make Check Payable to Fiorida Department of State OFFICERS AND DIRECTORS 10. TITLE NAME ian S. Farner STREET ADDRESS CITY-ST-ZIP 500207314315 05/06/11--01011--012 **150,00 TITLE NAME STREET ADDRES CITY-ST-ZIP TILLE NAME STREET ADDRESS 23713 CITY-ST-ZIE IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817,155 F.S

PRINTED NAME OF SIGNING OFFICER OR

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Daytime Phone #

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2. I hereby certify that the information supplied will indicated on this report or supplemental report to of the corporation or the receiver of trudges entrachment with an address, with all other like as provided for in a set 7. 188 ft. 5. BIGNATURE:	THEET ADDRESS	STREET ADDRESS		OTTACE ACCOUNT AND THE ACCOUNT	STREET ANDRESS TO SEE THE STREET ANDRESS TO SEE THE STREET ANDRESS TO SEE THE STREET AND SEE THE SEE T	Jentusery 1. Mary 1. Fee 19 9900.00 After New 7. Fee 16 990,000 After New 7. Fee 16 90,000 After Ne	BIONATURE TO TO THE STATE OF TH	0	33710 SM USA	CON NOT WRITE	DOCUMENT # PO6000	FOR PROFIT C
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n Chapter 110, monde Statures, I further centity that the information are legal effect as if made under ceth, that I am an officer of director. Florida Statues, and that ny rame appears in Blook 10 or on an a document to the Captering of State constitutes a tried degree fatony.			る。日は、のことの「			May Be to hac Q Spru Ast. Car	HCNanara S	Peterstand Programme Avenue	Continue of Status Dealand BB.76 Additional Continue of Status Dealand BB.76 Additional Continue of Current Registered Agent Continue of Current Registered Agent	20348 (1/1)		For Office Use Only