## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000064857 (2)

SUNSHINE GREEN ENTERPRISES AND MARKETING SERVICE S, INC.

FILED
May 04 1998 8:00am
Secretary of State



						_{	ANK BIBBI 1818 BI	
Principal Place	e of Business	Mailing Address					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3010 SOUTH BABCOCK STREET P O BOX 1294								
MELBOURNE	FL 32901		MELBOURNE FL 32802 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
•		VV						
						08/21/1995		
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26	26			59-3343081	No	t Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27	27			5. Certificate of Status Desired	Fee Re	quired
City & State	9	City & State	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28	28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the c		
24	25	29	30			Personal Property Tax due June 30.		No
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registered	d Agent	
GREËN, DAVID M				81	Name			
	10 SOUTH BABCOCK STREET			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	LBOURNE FL 32901					,		
				83				
				84	City		<b>85</b> Zip C	
				4	City	F		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stee of Florida Such change v	tatutes, the al	bove- d by t	named corporation	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its opointment as	s registered registered
agent. La	m familiar with, and accept the obli	gations of, Section 607.0505	5, Florida Stat	lutes.				
SIGNATURE			(E-CATC) Date in the	4 4 4 4 4 4	Laisagluse sanus	ed when reinstating) DATE		
40	Signature, typod or printed name of registered a	<u> </u>	13.	a Agent	t signature require	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTOR	S IN 12
12.	Dr riot na A			Th F	<del></del>	ADDITIONS/OFFIANGED TO OFFICE A	Change	Addition
NAME	ADDELL DALED AL		DELETE 1.1 TITLE		}		_ ,	
	AND THOOP ATT			1.3 STREET ADDRESS				
STREET ADDRESS	FROSTPROOF FL			1.4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE	rhostrhoor rt	DELETE			- ZIP		Change	Addition
		_		2.1 THEC.		Ķ.		_
NAME					DDDECC			
STREET ADDRESS				2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP				
CITY-ST-ZIP TITLE				3.1 TITLE			Change	Addition
		been	3.2 N					
NAME					DARCCC			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				3.4. CITY-ST-ZIP 4.1 TITLE			Change	Addition
TITLE	_		4.11					
NAME					nnoree .			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE		TIV-ST	- ZIP		Change	Addition
TITLE							onlings	
NAME			5.2 N		, ppprop			-
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE		([Y-S]-	- <u>I</u> IP		Change	Addition
TITLE	÷						Sumigo	
NAME			6.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		with this films does not our	6.4 C	ITY-SI	-ZIP	Section 110 07/3\/i) Florida Statutos I further	corlify that the	information
14. I hereby o	certify that the information supplied	with this filing does not qua	iliy for the exi	empti dubat	on stated in i	Section 119.07(3)(i), Florida Statutes. I further	under oath: the	atlaman

14. 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 informatic 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 employored 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.

4-74-98