PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000070140 1. Corporation Name

SGB INVESTMENTS, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90260 005 ***150.00



Principal Place	Mailing Address	-		· + 106/1001 110 10101 Alles Objet 00111 00111 00111 100111 100111 100111 10011	
1542 JUPITER COVE DRIVE SUITE 507		1542 JUPITER COVE DRIVE		٠	DO NOT WRITE IN THIS SPACE
JUPITER FL 33469		JUPITER FL 33469			3. Date Incorporated or Qualifed
				-	09/08/1995
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0610523 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27		_	Fee Required
City & State		City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip Country			Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible
24	25	29 30	¬ ′		Personal Property Tax.
24	9. Name and Address of Current		<u>'1</u>		10. Name and Address of New Registered Agent
			81	Name	
FRADLEY, DONALD S				Street A	ddress (P.O. Box Number is Not Acceptable)
27 PENNOCK LANE, SUITE 104			82	000(7)	
JUPI	TER FL 33458		83		
1			84	City	85 Zip Code
				<u></u>	FL 85 Zip Gode
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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AN		13.	it aignature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PT	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BARNGROVER, GEORGE		1.2 NAME		
STREET ADDRESS	1542 JUPITER COVE DR. #507		1.3 STREE	TADORESS	}
CITY-ST-ZIP	VOI 11C111C		1,4 CITY-S	T-ZIP	
TITLE	VS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BARNGROVER, SALLY				
STREET ADDRESS	1042 BOTTLER COVE DIL # 001			TADORESS	
CITY-ST-ZIP	JUPITER FL	☐ DELETE	2. 4 CITY-S 3.1 TITLE	ST-ZJP	☐ Change ☐ Addition
TITLE	•		3.2 NAME	-	_ , _
NAME STREET ADDRESS				TADORESS	
CITY-ST-ZIP			3.4. CITY-5	1	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	TADORESS	į
CITY-ST-ZIP	·		4.4 C/TY-S	T-ZIP	
TITLE		C DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		ļ	5.2 NAME		
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP		C perere	5.4 CITY-S 6.1 TITLE	T-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	62 NAME	Ì	Containing Controller

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

561-575-6625