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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S42249

SUN CITY GROUP INC.

Principal Place of Business

TITLE

NAME

STREET ADORESS

CITY-ST-ZIP

MARIE WAR

321 KN UNIVE	ERSITY DR	321 N UNIVERSITY DR			•			
VC-8 PLANTATION FL 33324		VC-8 PLANTATION FL 33324			DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualifed			
		•			03/29/1991	٠, .		
Principal Place of Business 2a. Mailing Address					4. FEI Number	App	lied For	
21		26			65-0257316	Not	Applicable	
		Suite, Apt. #, etc.	ot. #, etc.			\$8.75 Ac	dditional	
22	27	·		5. Certifcate of Status Desired	Fee Req	uired		
City & State City & State			·		6. Election Campaign Financing	\$5.00 N	May Be	
23		28			Trust Fund Contribution	Trust Fund Contribution Added to Fees		
Zip Country		Žip	Zip Country		8. This corporation owes the current year	Intangib <u>l</u> e '		
24 25 29		29	30		Personal Property Tax.			
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registere	d Agent		
		, , , , , , , , , , , , , , , , , , ,	8	1 Name	·			
HAIDAR, GEORGE			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)			
\$50.7060 NW 8TH CT.			ľ					
PLANTATION FL 33317			8	3		1.366 的形式图象		
			8	4 City	1.25 t. 25 t	85 Zip Co	ode	
				'	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	LITT		
SIGNATURE	Signature, typed or printed name of registered age			ent signature requi	ired when reinstating) (DATE			
12.		ID DIRECTORS	13.	-	ADDITIONS/CHANGES TO OFFICERS			
TITLE	D	☐ DELETE	1.1 TITLE		了 <i>不</i> 够没够。	Change	☐ Addition	
NAME	HAIDAR, GEORGE		1.2 NAME					
STREET ADDRESS	1		1.3 STRE	ET ADDRESS	•			
CITY-ST-ZIP	PLANTATION FL 33317		1.4 CITY-		·	<u> </u>		
TITLE		☐ DELETE	2.1 TITLE		÷	☐ Change	☐ Addition	
NAME			2.2 NAME		t ,	•		
STREET ADDRESS	S		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP		<u></u>	2. 4 CITY		,	. 50	- A 180	
TITLE SE	han exercic	☐ DELETE	3.1 TITLE	j		☐ Change	☐ Addition	
NAME			3.2 NAME		• • •			
STREET ADDRESS	S			ET ADDRESS		Hala Hillian S	er file	
CITY-ST-ZIP		/	3.4. CITY	+		Change :	Transport	
TITLE	<u> </u>	DELETE	4.1 TITLE			· , El Change) 🤄	.≟ ∐ Addision	
NAME	April 4 C	project to the second	4. 2 NAMI		•	٠.		
STREET ADDRESS	S	1# 1		ET ADDRESS				
CITY-ST-ZIP	<u> </u>	DELETE	4.4 CITY-			Change	Addition	
TITLE		LIDELETE	5.1 TITLE 5.2 NAME		و او در	Cilania	() Addition	
NAME	·		J.Z (NAVIVIE					
STREET ADDRESS			£ 2 QTDE		1 M M M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
CITY-ST-ZIP	S .		5.3 STRE 5.4 CITY-	ET ADDRESS	A MARK BAS			

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

□ DELETE

1/11/99

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90054 007 ***150.00

Change

☐ Addition