FILE NOW: FILING FEE A		\$ \$225.00		
CORPORATION ANNUAL REPORT	Sandra B. Mortham Secretary of State			
1996 DOCUMENT # 489414	(8)	CORPORATIONS		
Solar Products, Sun Tenk Inc.			2000018368 -05/23/9601044 ***225.00	332 016
Principal Place of Business 1200 Rower 23 Butler NO 07405	Maing Address 1200 Roule Butter No	93 201402		
us	us		11/13/1975 3	Date of Last Report
Principal Place of Business Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.		4. FEI Number 59-1658095	Applied For Not Applicable
22 City & State	27 City & State		Certificate of Status Desired G. Election Campaign Financing	\$8.75 Additional Fee Required \$5.00 May Be
Zip Country	28 Zp	Country	Trust Fund Contribution 8. This corporation has liability for intangib	Added to Fees le tax under s 199.032,
24 25 9. Name and Address of Current F	29 egistered Agent 	81 Name	Florida Statutes Yes No. 10. Name and Address of New Register	
A) CORPORATE SPECIALS, ONLY		ess (P.O. Box Number is Not Acceptable)	-	
Tallah assec 7/323	01	83		
11. Pursuant to the provisions of Sections 607.0502 an	d 607.1508, Florida Statute	84 City	tion authorite this atstampet for the surrance of	changing its registered office
or registered agent, or both, in the State of Florida. familiar with, and accept the obligations of, Section SIGNATURE:	607.0505, Florida Statutes			t as registered agent. I am
Signature, typed or profess name of registered agent and 12. OFFICERS AND D TITLE PD		TE: Registered Agent signature required 13.	when reinstating) DAY ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
NAME HOLLT KIN, NOR OLL STREET ADDRESS HANDER AND 10952	LI DELETE	1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS		NND DIRECTORS IN 12 Change Addition Change Addition Change Addition
TITLE	DELETE	2. 1 TITLE		☐ Change ☐ Addition
Shetts Wonda Street Address City-St-Zip Shetts Wonda Shetts Wonda S		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		
TITLE STD NAME Sheftsmaks STREET ADDRESS 30 FOX LEGGE POX CL	☐ DELETE	3 1 TIPLE 3.2 NAME	1	Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE TOTAL	PELETT	3 3. STREET ADDRESS 34 CITY - S1 - ZIP		
NAME HOLLEKIN Sherry STREET ADDRESS WORLEAM ROOK	DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP Airmont Dy 10952	T DELETE	4.4 CITY-SI-ZIP 5.1 TILLE		The Comment of the Co
NAME STHEET ADDRESS	C.J October	5.2 NAME 5.3 STREET ADDRESS		Change (Z) Addition
CITY-ST-ZIP TITLE	[] DELETE	5.4 CITY - ST - ZIP 6.1 T TLE		Addition
NAME STHEET ADDRESS COLV. ST. 200		6.2 NAME 6.3 STREET ADDRESS	S	\ \frac{1}{V}
CRY-59-ZIP 14. I do hereby certify that the information supplied wiff certify that the information indicated on this annual oath, that I am an officer or director of the corporate	eport or supplemental anni on or the receiver or trusted	ual report is true and accurate e empowered to execute this	e and that my signature shall have the same lo	runt officet no if pando undos
SIGNATURE:	In attachment with an addr MASK-5 W INTED NAME OF SIGNING OFFICE	efts		782-0800