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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

690413

(0)

SIGGUN, INC.

FILED Apr 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address \$ 1716 SOUTH LAKESIDE COURT **% 1716 SOUTH LAKESIDE COURT** VENICE FL 34283 VENICE FL 34293 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/16/1981 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 59-2142367 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent EVE, JR., ARTHUR SIGRID GEBEL
Street Address (P.O. Box Number is Not Acceptable)
1716 SOUTH LAKESIDE COURT 1440 LAKESIDE DRIVE VENICE FL 34293 City Zip Code VENICE 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. -27-88 **SIGNATURE** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. __ DELETE ___ Change Addition TITLE 1.1 TITLE NAME GEBEL, GUNTHER 1.2 NAME 1718 SOUTH LAKESIDE CT STREET ADDRESS 1.3 STREET ADDRESS VENICE, FL 0 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE ☐ Change ■ Addition GEBEL, SIGRID 2.2 NAME 1716 SOUTH LAKESIDE CT STREET ADDRESS 2.3 STREET ADDRESS VENICE, FL 0 CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP **DELETE** 4.1 TITLE ☐ Change ■ Addition TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP ☐ DELETE 5.1 TITLE ☐ Change ■ Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition TITLE ■ DELETE 6.1 TITLE Change R 2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CRTY-ST-ZIP

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 suppliemental 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 span attachment with appedress.

SIGNATURE:

SIGNATURE: