PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F20282

SUN HOMES, INCORPORATED

						<u> </u>			4 6 0 0 4 0 6
Principal Place of Business Mailing Address						1,101100 1170,1101		/	, 2,0
			AGEMENT, INC. KLAND PARK BLVD SUITE 118 IDALE FL 33311-1362			DO NOT WRITE IN THIS SPACE			
The Characterist						3. Date Incorporated or Qualifed			
						02/18/1981			
2. Principal P	lace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number			Applied For
21		26				59-2084816			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	27			5. Certifcate of Status Desired \$8.75 Additional Fee Required			
City & Stat	e	City & State			* .	6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country,	Zip	Соц 30	intry		This corporation owes the current year Personal Property Tax.	[Yes	□No
	9. Name and Address of Curre	ent Registered Agent		<u> </u>		10. Name and Address of New Registe	red A	gent	
				81	Name				Ì
SCHMOCKER, SUSANNA				82	Street Add	ddress (P.O. Box Number is Not Acceptable)			
2880 W. OAKLAND PARK BLVD. SUITE 118 FT. LAUDERDALE FL 33311									
				83					
11.1	LAUDERDALE LE 33311			84	City		FL	85 Zig	Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Stati	utes, the a	bove	named cor	poration submits this statement for the numos	e of ch	nanging i	ts registered
office or r agent. La	registered agent, or both, in the Stat im familiar with, and accept the oblid	e of Florida. Such change was actions of, Section 607.0505, F	authorized Iorida Stat	by tutes.	he corporat	tion's board of directors. I hereby accept the a	ppointi درو	ment as	registered
SIGNATURE	1' bl/llindon O	INDULUD SCHH	OCKE	12	•	9/20	: 14	9	[
SIGNATURE	Signature, typed or printed name of registered a	<u> </u>		Agent	signature requi	red when reinstating) DAT	<i>E</i>		
12.		AND DIRECTORS	13.		-	ADDITIONS/CHANGES TO OFFICER		☐ Change	
TITLE	PO	☐ DELETĒ	1.1 Ti					□ Citalig	- Cradition
NAME	LUDWIG, KURT		1.2 N		*D00E00				
STREET ADDRESS	2881 NE 33 CT #P-A		1		ADDRESS				.
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL 33306	[] DELETE	2.1 TI	TY-ST	-212			Change	e Addition
NAME		<u> </u>	2.2 N						
STREET ADDRESS					ADDRESS				.
CITY-ST-ZIP				:ITY-\$1					,
TITLE		☐ DELETE	3.1 11					Change	Addition
NAME			3.2 N	AME	. [•	{
STREET ADDRESS			3.3 \$	TREET	ADDRESS				,
CITY-ST-ZIP			3.4. 0	ITY-ST	r-ZiP				
TITLE	}	. DELETE	4.1 TI	TLE				Chang	e
NAME		·	4.2 N						
STREET ADDRESS					ADDRESS				ļ
CITY-ST-ZIP		□ BE: ===		ITY-ST	-ZIP			☐ Change	e Addition
TITLE		☐ DELETE	5.1 TI 5.2 N		-				e [*] \(\frac{1}{2} \)
NAME					ADDRESS				,
STREET ADORESS	1			TY-ST					}
CITY-ST-ZIP		☐ DELETE	6.1 TI		-			Chang	e Addition

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

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90178 043 ***158.75