PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500001604

1. Corporation Name

SUTTON INTERNATIONAL, INC.

Principal Place	e of Business
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21012 AURORA RD BEDFORD OH 44146 Mailing Address

21012 AURORA RD. BEDFORD OH 44146

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

04-22-1999 90114 015 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

				04/03/1995			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied	d For	
21 758	9 FIRST PLACE	26 7589 Firs	TPLACE_	34-1617473	Not Ap	pplicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addi		
22				o. Conticate of Clares Decision	Fee Requir	red	
City & Stat	8	City & State		6. Election Campaign Financing	\$5.00 May		
23 OPHUR	DO VILLAR, OHO	28 OAKWOOD VILLAM		Trust Fund Contribution	Added to Fe	ees	
Zip	Country	Zip	Country	8. This corporation owes the current year			
24 44146		29 44146-6711 30	USA	Personal Property Tax.	Yes Dt	No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ad Agent	-	
TOV	AD IAV C	¥	81 Name				
TOKAR, JAY G 2085 ANDREA LN.			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)			
				<u> </u>			
UNIT	-		83				
FI. I	MYERS FL 33992		84 City		85 Zip Code	e	
					·L `` `		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the above-named cor	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its reg	istered ered	
office or r	egistered agent, or both, in the State on State of the colligation of the colline of th	ions of, Section 607.0505, Florid	a Statutes.	and a book of directors. I hereby woods the op	,	- -	
SIGNATURE					· 	_	
SIGNATURE	Signature, typed or printed name of registered agen-	t and title if applicable. (NOTE: Re	gistered Agent signature requir				
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS			
TITLE	PTD	☐ DELETE	1.1 TITLE		Change [Addition	
NAME	SUTTON, ALAN J		1.2 NAME	and Complete			
STREET ADDRESS	21012 AURORA RD.		1.3 STREET ADDRESS	1589 FIRST PLACE DAKWOOO VILLACE DHIO 44			
CITY-ST-ZIP	BEDFORD OH 44146		1.4 CITY-ST-ZIP	AKWOOD VILLACE DITIO 44	146-6111		
TITLE		☐ DELETE	2.1 TITLE	· 	☐ Change {	Addition	
_ NAME			22 NAME				
STREET ADDRESS			2.3 STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •	-,	•	
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	1		3.4. CITY-ST-ZIP			_	
TITLE		☐ DELETE	4.1 TITLE		Change [Addition	
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
			4.4 CITY+ST-ZIP				
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		☐ Change [Addition	
NAME .			5.2 NAME				
1	1		5.3 STREET ADDRESS				
STREET ADDRESS			5.4 CITY-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change [Addition	
TITLE	Į.	C Detric	62 NAME				
NAME	1		TA INCHIL				
FRANC			CA CITATION AND COMME				
STREET ADDRESS			6.3 STREET ADDRESS 6.4 CITY-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 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 trusted 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 one an attachment with an address, with all other like empowered.

SIGNATURE:

REQUIREAN I SUTTON