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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SUNOHIO, INC.

F97000003545 (7)

Delegioni Dinas of Division

FILED Apr 06 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address													
1515 BANK PLACE, SW 1515 BANK PLACE, SW													
CANTON OH 44706				CANTON	CANTON OH 44708				50.	IOT MOITE IN THE	COVOL		
										Ountied	SPAUL		
									3. Date Incorporated or 07/08/1997	Qualmed			
2.	Principal Place	of Business	i	2a. Mailing	2a. Mailing Address					4. FEI Number		applied For	
21				26					31-1524096	31-1524096 Not Applicab			
	Suite, Apt. #, etc.			Suite, .	Suite, Apt. #, etc.				E Contitionto of Status F	5. Certificate of Status Desired \$8.75 Additional			
22				27					9. Certificate of Status L	esiled 🗀	Fee F	Required	
	City & State			City &	City & State				6. Election Campaign Fi	6. Election Campaign Financing \$5.00 May Be			
23					28				Trust Fund Contributi	on 🔲		to Fees	
	Zip	Country Zip				Cor	Country 8. This corporat			s or has paid the cu	irrent year Ir	ntangible	
24	_	25 29							Personal Property Ta	Personal Properly Tax due June 30. Yes No			
	9	, Name and	d Address of Curren	t Registered A	gent				10. Name and Address	of New Registered	Agent		
	C T C	DRPORATIO	on System				81	Name					
	1200 S	OUTH PIN					Ctract	Address (O.O. Davidson in No					
		ATION FL					Street	Address (P.O. Box Number is No	t Acceptable)				
							63						
							84	City		FL	85 Zip	Code	
	Pursuant to th	o provicione	of Sections 607 050	2 and 607 1500	Elorido Ctatuto	o the el	DO146	namad	corporation submits this stateme		-	ito registered	
••	office or regist	tered agent	or both, in the State and accept the obliga	of Florida, Such	change was a	uthorize	d by	the con	poration's board of directors. The	reby accept the ap	pointment a	s registered	
Sic	SNATURE												
-10		ture, typed or pr	inted name of registered age		le. (NO1E		d Age	nt signature	required when reinstating)	DATE	n nineara		
12	·	7C	OFFICERS AND	DIRECTORS	DELETÉ	13.			ADDITIONS/CHANGES	TO OFFICERS AN			
TITE	- 1 '	-	E,DALEA		F"] DEFFIE	1.1 11					☐ Change	Addition	
NAI	· 4					1.2 N/							
STA			PLACE SW			1.3 51	REET	ADDRESS					
		CANTON O	H 44/00			1.4 CI	TY - \$	T-ZIP					
TITE		SDV			DELETE	2.1 (1)	TLE				Change	☐ Addition	
NAM			ARLES A JR			2.2 NA	ME						
STR	EET ADDRESS 1515 BANK PLACE SW				2.3			ADDRESS					
CIT	r-ST-ZIP C	CANTON O	H 44706			2.4 C	ITY - \$	iT - ZiP					
TITE					DELETE	3.1 11					Change	Addition	
NAA	1E					3.2 NA	ME				,	1	
STR	EET ADDRESS							ADDRESS				ļ	
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	EET ADDRESS							ADDOC OC				1	
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TITL	1				ש טבענונ	5 1 711					∐ Change	Addition	
NAN						5.2 NA							
STR	EET ADDRESS					5.3 ST	REET .	ADDRESS					
CITY	'-ST-ZIP					5.4 CI	TY - S1	r- ZIP					
TITL	ε [☐ DELETE	6.1 TIT	LE				Change	☐ Addition	
NAN	IE					6.2 NA	ME	1					
STR	EET ADORESS					6.3 ST	REET :	ADDRESS					
CITY	-ST-ZIP					64 CI							

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 of an attachment with an address.

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