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

PROFIT CORPORATION ANNUAL REPORT

1999



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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90241 020 ***150.00

SUNBELT ENERGY CORP.	

Principal Place	e of Business	Mailing Address			- I (801100)120 (024 (801) 004) 0011 0011 0014 80131		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6150 NW 99 WA		6150 NW 99 WAY					
PARKLAND FL 3		PARKLAND FL 33067			DO NOT WINTE IN THE OPLOS		
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					07/21/1997		ļ
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
21 THICIPAL T	ace of business	26			65-0772027	<u> </u>	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	,			\$8.75 A	
22	•	27			5. Certifcate of Status Desired	" Fee Re	quired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year In	tangible	⊠N₀
24	25		<u>:0</u>]		Personal Property Tax.		₩
	9. Name and Address of Currer	t Registered Agent		1 Name	10. Name and Address of New Registered	Agent	
WOL	FE, LARRY		Ľ	14	UL B. MOYER, JR.		
	A JOHN KNOX ROAD		8		ess (P.O. Box Number is Not Acceptable)		
	AHASSEE FL 32303-6643		8	3 6 1 2	36 10 10 17 10 10 10 10 10 10 10 10 10 10 10 10 10		
.,,			Ľ				
			8	4 City	RKLAND FL	85 Zip C	P 0 6 2
44 Dureuant f	to the pavishing of Sections 607 050	2 and 607 1508 Florida Statutes	the abo	we-named corno	oration submits this statement for the purpose of	f changing its	registered
office or re	egistered agent, or both /in the State	of Florida. Such change was aut	horized t	y the corporation	n's board of directors. I hereby accept the appo	intment as reg	gistered
Ū	m familiar with, and accept the obliga	1	ia Statuti	es.	Marcy 6	1499	
SIGNATURE	Signature, typed or printed name of registered age		Registered A	gent signature required	when reinstating) DATE	, , , , , , , , , , , , , , , , , , , 	ì
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITL			Change	☐ Addition
NAME	lauro, anthony r		1.2 NAM	E			1
STREET ADDRESS	790 NEW RIVER INLET RD STE	203B	1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	NORTH TOPSAIL BEACH NO		1.4 CITY	-ST-ZIP			
TITLE	VCST	☐ DELETÉ	2.1 TITLE	i		Change	☐ Addition
NAME	MOYER, PAUL B		2.2 NAM	E			
STREET ADDRESS	6150 NW 99 WAY			EET ADDRESS			j
CITY-ST-ZIP	PARKLAND FL		2.4 CIT			☐ Change	Addition
TITLE		☐ DELETE	3.1 TITLE			CT change	
NAME			3.2 NAM				
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY 4.1 TITU	-ST-ZIP		Change	Addition
NAME			4. 2 NAM				_
				ET ADDRESS			}
STREET ADDRESS			4.4 CITY				
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITL			☐ Change	Addition
NAME		- -	5.2 NAM		•		
STREET ADDRESS			5.3 STR	EET ADDRESS	•		
CITY-ST-ZIP			5.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	6.1 TITL	=		Change	Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STR	EET ADDRESS	•		
CITY-ST-ZIP			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 of 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 copporation or the receiver of 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.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 6,1999

954-340-9459