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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # G13865

SUN COAST BUILDERS G. C., INC.

Delegate at Disease of Decisions	BA-10- B. J.J.			
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FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90104 002 ***158.75



Principal Plac	e of Business	Mailing Address			- LIBOLLIL ODDI ILDDU ILIDI SULEM DILES DELLI		#1#11 B1B11 (##1
1315 SE CORA PORT ST. LUC		1315 SE CORAL REEF ST PORT ST. LUCIE FL 34983			·		
US		US			DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed 12/15/1982		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	√ Ap	plied For
21		26			59-2241259	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	
City & Star	e	City & State			6. Election Campaign Financing	\$5.00	May Re
23		28			Trust Fund Contribution	Added 1	
Zip	Country	Zip	Country		8. This corporation owes the current year	r Intangible	
24	25	29 30			Personal Property Tax.	☐ Yes	/25 No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registe	red Agent	
			81	Name			
EPRIFANIA, ANTHONY 323 1315 SE CORAL REEF ST		82 Street Address (P.O. Box Number is Not Acceptable)					
POF	IT ST. LUCIE FL 34983		83				
			84	City	ित्रिमेश्वर देविता अने विकास विकास के किया है। विकास के किया के किया है। विकास के किया किया किया किया किया किय स्थान के किया किया किया किया किया किया किया किया	85 Zip (Code And Issue
4476	to the provisions of Postions CO7 DECC					FL	
office or r	egistered agent, or both, in the State of m familiar with and accept the obligation	and 607,1508, Florida Statutes, tr Florida: Such change was author one of, Section 607,0505, Florida S	ne above rized by t Statutes.	the corporation	ration submits this statement for the purpos 's board of directors. I hereby accept the a	e of changing its ppointment as re	registered gistered
SIGNATURE	Many (as	area HNTH	HONY	BPRI	FANIA 1</th <th>199</th> <th></th>	199	
12.	OF ICERS AND		13.	t signature required v	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTO	DS IN 12
TITLE	PTD		1.1 TITLE	1		☐ Change	☐ Addition
NAME	EPRIFANIA, ANTHONY (CHRM	_	1.2 NAME	Ì	CARA IN THE	onango	
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	PORT ST.LUCIE FL		I.S SINEE!	ADDRESS			į
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11100	Ven	7	1.4 CITY-ST	-ZIP	·	Change	Addition
MAGAE	VSD SANDY AND	DELETE 2	2.1 TITLE	-ZIP		☐ Change	Addition
NAME	EPRIFANIA, MARY ANN	☐ DELETE 2	2.1 TITLE 2.2 NAME			☐ Change	Addition
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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 compration 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. The property of the compration of t

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP