## 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 # G32129

(0)

SUNCOAST IMPORT & EXPORT, INC.

FILED
May 01 1998 8:00am
Secretary of State



Principal Flace of Busilless		Mailing Address				
5150 ULMERTON RD. #9 CLEARWATER FL 34620		5150 ULMERTON RD. #9 CLEARWATER FL 34620			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	$\neg$
					04/06/1983	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	ᅥ
21		26			<b>59-2296053</b> Not Applical	
Suite, Apt. #, etc.		Suite, Apt #, etc.			SR 75 Additional	$\dashv$
22		27			5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		Zip Country			Trust Fund Contribution Added to Fees	
Zip Country 29 29		7ip 33760			B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
24 33760   25   29 33760   30   9. Name and Address of Current Registered Agent			<u> </u>		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	$\dashv$
						$\dashv$
MEINDERTSMA, GOITZEN 2501 WINDING WAY						
	M HARBOR FL 34683		82	Stree	et Address (P.O. Box Number is Not Acceptable)	
			83			
			84	City	FL 85 Zip Code	$\neg$
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above	le-name	ed corneration submits this statement for the purpose of changing its register	ēď
office or re	ogistered agent, or both, in the State on Iamiliar with, and accept the obligat	of Florida. Such change was au	thorized by	the co	orporation's board of directors. I hereby accept the appointment as registered	<b>ነ</b>
	in terminal with and needly the ornigin	nona or, dection our loods, mon	da Giaidio	J.		
SIGNATURE	Signature, typed or printed name of registered agent	and his if applicable (NOTE	Registered Age	ent signatu	ture required when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	$\neg$
TITLE	P	DELETE	1.1 TRILE	•	Change Addit	ion
NAME	MEINDERTSMA, GOITZEN		12 NAME			l
STREET ADDRESS	2501 WINDING WAY		13 STREET	ADDRESS	s	
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY-S	37 - ZIP		
TITLE		DELETE	2 1 1 ITLE	,	Change Addit	ion
NAME			22 NAME			
STREET ADDRESS			23 STREET	ADDRESS	s	-
CITY-ST-ZIP			2. 4 CITY-	ST - ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addit	ion
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS	SS .	
CITY-ST-ZIP			3.4, CITY-1	ST-ZIP		
TITLE		DELE <b>te</b>	4.1 TITLE		☐ Change ☐ Addit	ion
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS	S	
CITY-ST-ZIP			4.4 DITY - S	T-ZIP		
TITLE		DELET <b>e</b>	5.1 TITLE		☐ Change ☐ Addil	ion
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS	38	
CITY-ST-ZIP			5.4 CITY-S			
TITLE		DELETE	6.1 TITLE		Change Addit	ion
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS	ss	
CITY-ST-ZIP			6.4 CITY- S	ST-ZIP		
	ertify that the information supplied wit	h this filing does not qualify for			ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	on

4. Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes: Flurtner coefficient indicated on this annual report or suppliemental armual 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

W/20/1968 813-573-1683