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 # H70057 SUN MARKETING OF FLORIDA, INC.

(5)

FILED Apr 20 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			I 1841an ann saen aonn agust dhin tast aiste a	AN ANDII BIBLI BIBLI BIBLI 1881
701 CROSBY DR ALTAMONTE SPRINGS FL 32714 701 CROSBY DR ALTAMONTE SPRINGS FL					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
					08/06/1985	
2. Principal P	lace of Business	2a. Mailing Address		· -	4. FEI Number	Applied For
21		26			59-2585960	Not Applicable
Suite, Apt.	#, otc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State	9	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Countr	ν	8. This corporation owes or has paid the c	
24	25	29	30	•	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer				10. Name and Address of New Registere	d Agent
PA	PANIA, WILLIAM A		81	Name		
	CROSBY DR		62	Street An	Idress (P.O. Box Number is Not Acceptable)	
ALTAMONTE SPRINGS FL 32714			Ľ	Oliver Ad	rainas (1.0, Box Hamber is Hot Hoopitalis)	
			83			
			84	City		85 Zip Code
į				'	proporation submits this statement for the purpose	L []
SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered age				ration's board of directors. I hereby accept the appropriate the appropriate of the propriate of the propria	opointment as registered
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DP	☐ DELETE	11 TITLE			Change Addition
NAME	PAPANIA, PEGGY H		1.2 NAME			
STREET ADDRESS	701 CROSBY DR		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		1.4 CITY -	ST-ZIP		
TITLE			2.1 TITLE			Change Addition
NAME	PAPANIA, WILLIAM A		2.2 NAME			
STREET ADDRESS	701 CROSBY DR			1 ADDRESS	•	
CITY-ST-7IP	ALTAMONTE SPRINGS FL	Decemen	2.4 CITY	ST-ZIP		Change Eddition
TITLE		☐ DELETE	3.1 TITLE	1		Change Addition
NAME DECET ADDRESS			3 2 NAME	į į		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-	ST-ZIP		Change Addition
1 1						
NAME STREET ADDRESS			4. 2 NAME	T ADDRESS		
CITY-ST-ZIP						
TITLE		☐ DELETÉ	4.4 CITY- 5 1 TITLE	51-ZIP	,	☐ Change ☐ Addition
NAME			52 NAME	}		Change La radinon
STREET ADDRESS						
1			-	T ADDRESS		
CITY - ST - ZIP TITLE		DELETE	5.4 CITY- 6.1 TITLE	51 - ZIP		Change Addition
NAME		LI DECENE	6.2 NAME			- Change - rigoribit
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP						
OTIT-ST-ZIP			6.4 CITY -	31-71L		

14. Thereby 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 on an attachment with an address.

SIGNATURE: MEGGY H. PAPAINIA

(10rul 15, 1998 (407) 862-0585