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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H70057**

1. Corporation Name

SUN MARKETING OF FLORIDA INC

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90029 006 ***150.00

Principal Place	e of Rusiness	Mailing Address						
		-						
		701 CROSBY DR ALTAMONTE SPRINGS FL	32714			. DO NOT WRITE IN TH	IS SPACE	
	•					3. Date Incorporated or Qualifed		
						08/06/1985		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	A	pplied For
21	*	26				59-2585960	Į, N	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.					\$8.75	Additional
22		27				5. Certifcate of Status Desired	Fee R	equired
City & Stati	e	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	- Added	to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year		
24	25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent		 		10. Name and Address of New Registere	d Agent	
DADA	ANIA, WILLIAM A			81	Name			\
			ŀ	82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	CROSBY DR			$\sqcup \bot$				
ALIA	AMONTE SPRINGS FL 32714			83				
			ŀ	84	City		. 85 Zip	Code
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office or re agent. I at SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obligation of	e of Florida. Such change was a ations of, Section 607.0505, Florent and title if applicable. (NOT)	authorized orida Statu E: Registered	by thutes.	ne corporat	tion's board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors.	oointment as n	egistered
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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 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, with all other like empowered.

SIGNATURE:

(407) 862-0585