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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H72722

(2)

**SOLAR SENSE CORPORATION** 

FILED
Jan 14 1997 8:00am
Secretary of State

	ISHA NIKA NI	U BABA 1000	

Principal Place of Business 9725 INTERNATIONAL COURT ST PETERSBURG FL 33716 US		Mailing Address	PO BOX 58181 TIERRA VERDE FL 33715-8181			F SOUNDIT OTTE TOURS TOUR STORE				
03			1			3. Date Incorporated or Qualified 08/23/1985		ite of Last R 15/1996	eport	
2. Principal P	lace of Business	2a. Mailing Addres	S			4. FEI Number		Ar	oplied For	
21		26				59-2776336			ot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, et	C.			5. Certificate of Status Desired			Additional equired	
City & State	e	City & State				6. Election Campaign Financing			May Be	
Zip	Country	28   Zip		Country		Trust Fund Contribution	<u> </u>		to Fees	
24	25	29	30	Journing		8. This corporation has liability for it Florida Statutes	ntangible Yes [		. 199.032,	
24)	9. Name and Address of Curr			<u>-</u>		10. Name and Address of New Re				
wve	S, LARRY			81	Name		<b>9</b>			
	is, darit 5 international CT street									
	PETERSBURG FL 33716			82	Street Add	ress (P.O. Box Number is Not Acceptab	ile)			
31.1	reletiopolici i e con io			83			······································		I	
				84	City			<b>85</b> Zip	Code	
-44 5		Table Tools Track Front				poration submits this statement for the p	<u>FL</u>			
office or r agent 1 a	registered agent, or both, in the St im familiar with, and accept the ob	ite of Florida. Such change	was author	ized by	the corpora	tion's board of directors. I hereby accep	the app	ointment as	registered	
SIGNATURE	Signature, typed or printed name of registered	agent and their applicable	(NOT: Reps	tered Age	nt signature requ	ired when reinstating)	DATE			
12.	OFFICERS A	ND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	3S IN 12	
TITLE	PSD	DELE	TE 1.	.1 TITLE			<del></del>	Change	Addition	
NAME	WYSS, LARRY		1.	.2 NAME						
STREET ADORESS	9725 INTERNATIONAL CT S	TREET	1.	3 STREET	ADDRESS					
CITY - ST - ZIF	ST. PETERSBURG FL		1.	.4 CITY - S	r-7IP					
TITLE	VTD	DELE	TÉ 2	1 TITLE				Change	Addition	
NAME	WYSS, KATHY		2	2 NAME						
STREET ADDRESS	9725 INTERNATIONAL CT S	TREET	2	3 STREET	ADDRESS					
CITY-ST-7P	ST. PETERSBURG FL			4 CiTY - 5	it-zip					
1:TLE		☐ DELE	TE 3	1 TITLE				Change	Addition	
NAME			3	2 NAME						
STREET ADDRESS			3	3 STREET	ADDRESS					
CITY-ST-7.P				4. CITY - S	T-ZIP					
TITLE		[_] DELE		1 TITLE				Change	Addition	
NAME				2 NAME						
STREET ADDRESS				3 STREET						
CITY-ST-ZIP		Teere		4 CHY-S	1 - ZIP	IP***		П.		
IIITE		DELE	•	1 TITLE				Change	Addition	
NAME				.2 NAME						
STREET ADDRESS				3 STREET						
CHY-S1-ZIP		T rece		4 CITY-S	T-ZIP			T 1 0	4.4.22	
THILE		Ĺ DETE		i.1 TITLE				Change	Addition	
NAME				:2 NAME						
STREET ADDRESS				.3 STREET						
CITY - ST - ZIP	<u> </u>		6	4 CITY - S	T - ZIP					

14. I do 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 supplieriental 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:

UPLE AND TYPET OF PHINTED NIME OF SIGNING OFFICERS

LA PYU

Jyss - Presiden

1-8-97

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