## 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 #

K24586

(5)

SIRIUS, INC.

**FILED** May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							TION BION BION BION BHON II	
6300 N. WICH MELBOURNE US	KHAM RD. # 127 FL 32940	6300 N. WICKHAM RD. # 127 Melbourne Fl 32940 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
						05/18/1988		
	lace of Business	2a. Mailing Address				4. FEI Number	Applied F	
21	4 -4-	26				59-2894238	Not Appli	
Suite, Apt.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Addition Fee Required	
City & State	ə 	City & State	<u>├</u>			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	7ip	Coun	itry		8. This corporation owes or has paid the		,
24	25 29 30			Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent					Name	10. Name and Address of New Register	id Agent	
GOLDMAN, MITCHELL S.				B1	name			_ ]
	WILLOW ST. DCOA FL 32922		[1	82	Street Addres	ss (P.O. Box Number is Not Acceptable)		
"	NOW LE 35855			вз				
				B4	City		er Zin Codo	
			'	04	City	F	B5 Zip Code	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the ab- office or registered agent, or both, in the State of Florida. Such change was authorized agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statu					named corpor he corporation	ration submits this statement for the purpose n's board of directors. I hereby accept the a	of changing its regist oppointment as registe	tered red
SIGNATURE								
Signature, typed or profited name of registered agent and tills if applicable (NOTE: Re				Agent	signature required			
12.	OFFICERS AN	ND DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
NAME	ALIENTO AND ME		1.1 TITL 1.2 NAM				□ onenge □ ∧	Julion 3
STREET ADDRESS	4444 14511 1410 7011 515		1.3 STREET ADDRESS		NADEGE			
CITY-ST-ZIP	BOOK EDGE EL AGGE		1.4 CIT		1			
TITLE	P	DELETE	2.1 TITLE		20		☐ Change ☐ Ac	ddition
NAME I	CHENG, SHER LAM		2.2 NAN	ΛE			_ , _	
STREET ADDRESS	1493 WELLINGTON CIR.			2.3 STREET ADDRESS				
CITY-ST-ZIP	ROCKLEDGE FL 32955			Y-S1-	· ZIP			1
TITLE	DELETE 317		3.1 TITL	.E			Change Ac	3dition
NAME	320		3.2 NAM	3.2 NAME				
STREET ADDRESS	i l		3.3 STR	3.3 STREET ADDRESS			•	
CITY-ST-ZIP			3.4. CIT		ZIP			
TITLE		☐ DELETE	4.1 TITLE				∐ Change	ddition
NAME				4. 2 NAME 4.3 STREET ADDRESS				
STREET ADDRESS	· · ·				1			- }
CITY-ST-ZIP TITLE		DELETE	51 THILE		ZIP	· · · · · · · · · · · · · · · · · · ·	Change Ad	ddition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET		ODRESS			1
CITY-ST-ZIP			5.4 CITY - S					
TITLE			6.1 TITL				☐ Change ☐ Ad	dition
NAME			6.2 NAN	.2 NAME			-	
STREET ADDRESS			6.3 STR	.3 STREET ADDRESS				
			6.4 CITY					
44 Lharabiro	medite at the state of a second construction of a state of a	with this filing shops and available for	Nh a arras		an atatom in Co	action 110.07/2)/i) Florida Statutos, I further	- a stife , the at the a !-decess.	- 1

r nereuy 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 of trustee employered 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 or an attachment with an address.