## 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 # K44988

(9)

SUN-WEST ENTERPRISES, INC.

Principal Place of Business

1200-51ST AVENUE NE ST. PETERSBURG FL 22703 Mailing Address

1300-51-6T-AVENUE NE-6T: PETERSBURG FL-83703 FILED Feb 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

•••								3. Date Incorporated or Qualified					
							11/14/1988						
2. Principal Pla	ce of Business	2a. Mailing Address					4. FEI Number			Ap	plied For		
21 5729 Pc	KERTA DEL SO	26 5729 PUERTA DEL SO				שט.	59-2912504			No	t Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status	Desired		\$8.75		
22 UNIT	482	27 UNIT 482					5. Certificate of Statos	5 0031100		Fee Re	equired		
City & State				City & State				6. Election Campaign Financing \$5.00 May Be					
23 ST. 12	TERSBURG	28 ST. PETERSBURG, FL					Trust Fund Contribution Added to Fees						
Zip	Coun	Zip Country				İ	8. This corporation owes or has paid the current year Intangible						
24 337/5		29 337/5 30 US			5		Personal Property Tax due June 30. 🔲 Yes 🛂 No						
g, Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent							
NAP	PER, ROGER L			81	Name								
4800-51DT-AVENUE NE						82 Street Address (P.O. Box Number is Not Acceptable)							
-ST. PETERSBURG FL 99703						Street Address (P.O. Box Number is Not Acceptable)  5729 PHERTA DEL SOL BLUB.							
						83							
						1 (N)T 492						Code	
						84 St. Peters Bung FL 85 Zip Co						Code 37/5	
14 Pursuant to the provisions of Specimes 607 0502 and 607 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered													
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE SI	gnature, typed or printed nar	me of registered agent	and title if applicable	e. (NOTE:	Registered Age	erulangia ine	required v	vhen reinstaling)		DATE			
12.		OFFICERS AND	<del></del>		13.			ADDITIONS/CHANG	ES TO OFFIC				
TITLE	PD			DELE <b>te</b>	1.1 TITLE					<u> </u>	Change	Addition	
NAME	Napper, Roger	₹ L			1.2 NAME			^ ^		,			
STREET ADDRESS 1990-51ST AVENUE NE					1.3 STREET ADDRESS 57		572	ig Pueera Des	SOL BL	ממ, החב	17482		
CITY-ST-ZIP	ST. PETERSBURG	G FL 33703			1.4 CITY - \$	ST-ZIP	57.1	eg Pueera Des Peresseura,	R 33	715			
TITLE	STD			DELETE	2.1 TITLE						Change	Addition	
NAME .	NAPPER, BOBBI	L			2.2 NAME	- 1							
STREET ADDRESS		2.3 ST		ADDRESS	570	29 Puezza Dez	SOL B	.vp., 4	UIT YO	82			
CITY-ST-ZIP	ST. PETERSBURG	3 FL 33703			2. 4 CITY -	ST-ZIP	52.1	29 Pueers Des Penses Bung,	Fz 33'	715			
TITLE				DELETE	3.1 TITLE						Change	Addition	
NAME					3.2 NAME	- 1							
STREET ADDRESS					3.3 STREET	ADDRESS							
CITY-ST-ZIP					3.4. CITY - :	ST-71P							
TITLE				DELETE	4.1 TITLE						Change	Addition	
NAME					4, 2 NAME								
STREET ADDRESS					4.3 STREET	ADDRESS							
CITY-ST-ZIP					4.4 CITY - S	- 1							
TITLE				DELETE	5.1 TITLE	., 21					Change	Addition	
NAME			•		5.2 NAME					_	-		
STREET ADDRESS					5.3 STREET	ADDRESS							
					5.4 CITY- S	- 1							
CITY-ST-ZIP TITLE	<del></del>			DELETE	6.1 TITLE	11-215				Τ	Change	☐ Addition	
1			,		6.2 NAME	.				-			
NAME CTOSET ADODESS					6.3 STREET	ADDRESS							
STREET ADDRESS													
CITY-ST-ZIP	rtify that the informat	ion supplied with	this filing doe	s not qualify for	6.4 CITY-S		d in Sec	ction 119.07(3)(i), Florid	la Statutes I	further cert	ify that the	information	
indicated or	n this annual report o	or supplemental :	annual report is	s true and accu	rate and th	at my sigr	nature s	shall have the same leg	al effect as if	made unde	er oath; tha	atlam an	
officer or di Block 12 or	rector of the corpora Block 13 if changed	tion or the receiv I, or on an attach	er or trustee ei ment with an a	mpowered to exideress.		report as	require	d by Chapter 607, Flor	ioa Statutes; \	and that my	rname app	pears in	