10/2

2004 FOR PROFIT CORPORATION
ANNUAL REPORT (AR),
9/9/2004-90007-015-\$150.00

|   | MENT # K51202  | ₹ <sub>2</sub> >                        |                 |   |  | ; findano  |   |  |
|---|--|---|-----------------|---|--|--|---|--|
| 1. Entity Name RAYSUN, INC.   |  |   |                 |   | 0  | LOEC 30 PM   | 3: 05   |  |
| · · · · · · · · · · · · · · · · · · ·   |  |   |                 |   |  | OFFICERTARY OF   | STATE   |  |
| Principal Place of Susiness   |  | Mailing Address                         |                 |   |  | SECRETARY OF STALLAHASSEE, FL  | ORIDA   |  |
| P O BOX 7642<br>SARASOTA FL 34278<br>US   |  | P O BOX 7642<br>SARASOTA FL 34278<br>US |                 |   |  | a enga enga arga engal ar  | min a san   |  |
| 2. Principal Place of Business  |  | 3. Mailing Address                      |                 |   |  |  |   |  |
| Suite. Apt. #, etc.   |  | Suite, Apt, #, etc.                     |                 | MOORE CR2E034 (4/04)  |  |  |   |  |
| City & State  |  | City & State                            |                 | 4. FEI Numb   | 4. FEI Number 65-0085219 Applied For Not Applicat              |  | pplied For<br>ot Applicable                                       |  |
| Zip   | Country Zip  |   | Country         |   | 5. Certificate of Status Desired S8.75 Additional Fee Required |  |   |  |
|   | 6. Name and Address of Current   | Registered Agent                        |                 | Name  | 7. Name and  | Address of New Regist  | ered Agent  |  |
| RANDOLPH, TINA  |  |   |                 | Street Address (P.O. Box Number is Not Acceptable)              |  |  |   |  |
| 432 N CONRAD AVE<br>SARASOTA FL 34237   |  |   |                 |   | F.O. BOX NUMB  | •  |   |  |
|   |  |   |                 |   |  |  |   |  |
|   |  |   |                 | City  |  |  | FL Zip Cod  | le   |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. |  |   |                 |   |  |  |   |  |
| _   | Sana Por   | 1 1 Strus                               | <del>/-</del>   |   |  |  | 9.2.04  |  |
| SIGNATURE   | Signature, typed or printed name of registered agen  | t and little applicable. (NOTI          | : Pegissere     | d Agent signature required                                      | ( when reinstating)  | i  | DATE  |  |
|   | ILE NOW!!! FEE IS \$550.00   |   |                 | ws for the waiver o   |  | 9. Election Campaign Fi  | inancing \$5.   | 00 May Be                                  |
|   | DUE BY September 8, 2004   |   | -               | box, the corporation. Fee to file is \$1                        | _  | Trust Fund Contributi  |   | ed to Fees                                 |
| 10.   | OFFICERS AND   | DIRECTORS                               | 11.             |   | ADDITIONS  | /CHANGES TO OFFICERS   | AND DIRECTOR  | S IN 11                                    |
| TITLE<br>NAME   | P<br>RANDOLPH, TINA  | ☐ Delete                                | TITLE<br>NAME   | E .   |  |  | ☐ Change  | ☐ Addition                                 |
| STREET ADDRESS  | DRESS 3604 WEBBER STREET   |   |                 | ET ADDRESS  |  |  |   | ı  |
| CITY-ST-ZIP   | SARASOTA FL  |   |                 | -ST-ZIP   |  |  |   |  |
| TITLE<br>NAME   | Detete:  |   |                 |   | ☐ Change ☐ Addition  |  |   |  |
| STREET ADDRESS  |  | s                                       |                 | ET ADORESS  |  |  |   | Í  |
| CITY-ST-ZIP   |  |   |                 | ST-ZP   |  | <del></del>  |   |  |
| TITLE<br>NAME   |  | Delete                                  | TITLE<br>E HAA! |   |  |  | Change  | Addition                                   |
| CIPLET ADDRESS<br>CITY-ST-ZIP   |  |   | STRE            | ET ADDPESS –<br>-ST-ZIP   | -  |  |   |  |
| TITLE   |  | ☐ Delete                                | TITLE           |   |  |  | ☐ Change  | Addition                                   |
| NAME<br>STREET ADDRESS  |  |   | NAMI            | ET ADORESS  |  |  |   |  |
| CITY-ST-ZIP   |  |   |                 | -ST-ZIP   |  |  |   | ĺ  |
| गार   |  | ☐ Delete                                | TITLE           |   |  |  | ☐ Change  | Addition                                   |
| HAME<br>STREET ADDRESS  | 1  |   | NAMI            | ET ADDRESS  |  |  |   | ì  |
| CITY-ST-ZIP   |  |   |                 | ST-ZIP  |  |  |   | 1  |
| TITLE   |  | ☐ Deleta                                | TITLE           |   |  |  | ☐ Change  | Addition                                   |
| NAME<br>STREET ADDRESS  | ļ  |   | NAM             | 1   |  |  |   | 1  |
| CITY-ST-ZIP   | ,  |   |                 | ET ADDRESS<br>-S1-ZIP   |  |  |   | 1  |
| of the co   | certify that the information supplied wit<br>ton this report or supplemental report<br>reporation or the receiver or trustee employee an attachment with | powered to execute this report          | as requir       | nption stated in Se<br>ure shall have the<br>red by Chapter 607 | ction 119.07(3)<br>same legal effe<br>7, Florida Statute       | (i), Florida Statutes. I furthe<br>ct as if made under oath; t<br>es; and that my name app | er certify that the i<br>hat I am an office<br>ears in Block 10 o | nformation<br>or director<br>r Block 11 if |
| changed   | , or on an attachment with an address,   | with all other like embowered           |                 |   |  |  |   |  |
| SIGNAT  |  | 0 1111                                  | ′ .             |   |  | 00.011   |   | j  |

£ 12.00

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FILED

12-28-04

Dear SIR/MADAM,

I am writing to you concerning our of Florida Corporations,
Raysun Inc., AND RAVEN Enterprises Inc., On August

28th of this year, I filed annual reports for both, as it
was brought to my attention I had not done it. I filed both
returns at the same time, and in Advertantly checked the box
on one return stating I had not received prior notice, but
forgot to check the box on the other return, thus the error
in filing Raysun's return correctly. I realize it is not
much proof, but I copied both returns off the internet,
Pario Both \$150 Fees on the same day from the same
checking account, both checks were numbered in sequence
(#1601 For Raysun - #16D2 for Rayen, Both pareo 8-28-04)
And both were sent out and postmarked together, except just
forgething to check the box on Raysun's return.

I also am Certain the 1st question that comes to mind is why did I want so long to reply. Our family members are each taking turns, caring for my DAD in 6 month intervals as he is terminally ill. He lives in Lace City Florida (VA Hospital) (phone # 386-758-8655) AND I have not been able to return home to SARasota FLA. Where our mail goes since Sept. 1'st, and appearantly, only our personal wimail was being forwarded.

I am just humbly asking if you could please review my

I am just humbly asking if you could please review my information, and Baseo on my oversight, would please consider revivatating Raysun INC., as Raven's return was accepted and filed. We have been incorporated since 1988 and have filed correctly every year except this one Thank you for your time t

CONSIDERATION, AND WISH YOU a happy holiday Season.

Sincerely, Juna Roulff Sunt TiMA R. SMITH pres