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

PROFIT CORPORATION ANNUAL REPORT

1998

SUN GUARD, INC.



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L41345

(4)

FILED Mar 18 1998 8:00am Secretary of State

Principal Place of	f Business	Mailing Address						
% GEORGE HERNANDEZ 4396 NICIA WAY GREENACRES FL 33463		% GEORGE HERNANDEZ 4396 NICIA WAY GREENACRES FL 33463			DO NOT WRITE IN THI: 3. Date incorporated or Qualified	S SPACE		
2. Principal Place	e of Business	2a. Mailing Address				01/05/1990 4. FEI Number	Applied For	
21		26				65-0164334	Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & Stale				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Ζφ 29	Country 30			This corporation owes or has paid the of Personal Property Tax due June 30.	urrent year Intangible	
	9, Name and Address of Cur	rent Registered Agent		Ι		Name and Address of New Registere	d Agent	
	ANDEZ, GEORGE				Name			
	NICIA WAY NACRES FL 33463			82	Street Addre	ddress (P.O. Box Number is Not Acceptable)		
				83				
				84	City	F	L 85 Zip Code	
office or requ	he provisions of Sections 607.9 stered agent, or both, in the St amiliar with, and accept the of	ate of Florida. Such change v	vas authorize	d by	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the appropriate the submits of the s	of changing its registered opointment as registered	
SIGNATURE.								
Slor	white, typical or printed name of registeres			ed Age	nt signature require	ed when reinstating) DATE		
12. OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	TITLE D STATE				True Change Addition			

HERNANDEZ, JORGE 1.2 NAME NAME 4396 NICIA WAY STREET ADORESS 1.3 STREET ADDRESS **GREENACRES FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2 1 TITLE NAME HERNANDEZ, SANDRA 2.2 NAME STREET ADORESS 4396 NICIA WAY 2 3 STREET ADDRESS **GREENACRES FL** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 indicator on this 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 13 if change of or or all attachment with an address.

CICMATUDE.

JORGE HOPWALDS

MARCH. 13 - 1998

CR2E034 (10/97)