

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90390 027 ***150.00

40006163



| | | | |
|---|---|--|---|
| DOCUMENT # M51646 1. Entity Name FLO-SUN INCORPORATED | | | |
| Principal Place of Business ONE NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33402 | | Mailing Address ONE NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33402 | |
| 2. Principal Place of Business One North Clematis St. | | 3. Mailing Address One North Clematis St. | |
| Suite, Apt. #, etc. Suite 200 | | Suite, Apt. #, etc. Suite 200 | |
| City & State West Palm Beach, FL | | City & State West Palm Beach, FL | |
| Zip 33401 | | Zip 33401 | |
| 4. FEI Number 59-2821515 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent TABERNILLA, ARMANDO A ONE NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33401 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
| 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. | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE <input checked="" type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | VT BLOMQUIST, ERIK J ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete | TITLE <input type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE <input checked="" type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | D AZQUETA, LILLIAN F ONE NORHT CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete | TITLE <input type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | One North Clematis St., STE 200 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE <input checked="" type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | DCEO FANJUL, ALFONSO ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete | TITLE <input type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE <input checked="" type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | DVCP FANJUL, JOSE F ONE NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete | TITLE <input type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE <input checked="" type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | VAS TARR, WILLIAM F ONE NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete | TITLE <input type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE <input checked="" type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | V FANJUL, ALEXANDER ONE NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete | TITLE <input type="checkbox"/> NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | Armando A. Tabernilla, VP 2/15/05 561-655-6303 <small>Date Daytime Phone #</small> | |

CONTINUED

ATTACHMENT

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DOCUMENT # M51646

1. Corporation Name

FLO-SUN INCORPORATED

40062124

- CONTINUED

ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS

| | | |
|--|---|--|
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | V Boyette, Van R. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | EV Carson, Donald W. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | V Fanjul, Andres B. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | AS Del Busto, Jorge One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | D Fierro, Alfonso One North Clematis St., Suite 200 West Palm Beach, FL 334010 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | V/CFO Hernández, Oscar R. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | D Patterson, David C. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | D/V Recio, Alberto S. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | V Winterling, M. Christine One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME ✓ STREET ADDRESS CITY-ST-ZIP | VS Tabernilla, Armando A. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V Fanjul, Jose F., Jr. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V Fernandez, Luis J. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AT Ross, Amanda J. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V Shackelford, Parks D. One North Clematis St., Suite 200 West Palm Beach, FL 33401 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |