Jun 18, 1999 8:00 am Secretary of State

06-18-1999 90008 008 ***550.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	M90206
1. Compration Name	

SUNCOAST ENTERTAINMENT CORP.

26 Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country 29 Suite, Apt. #, etc. Zip Country Zip Country Added to Fee Personal Property Tax. PAULUS, THOMAS J. 6610 JOANNA CR. FT. MYERS FL 33919 Possible Suite, Apt. #, etc.	Applied For Not Appliedle \$8.75 Additional Fee Required \$5.00 May Be Added to Fees	DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 07/19/1988 4. FEI Number - 65-0070947 5. Certificate of Status Desired 6. Election Campaign Financing	,				
145 FT MYERS FL 33907-742 US 145 FT MYERS FL 33907 US 3. Date Incorporated or Qualifed 07/19/1988 2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 27 City & State Country Coun	Applied For Not Applicable = \$8.75 Additional Fee Required \$5.00 May Be Added to Fees intangible	3. Date Incorporated or Qualifed 07/19/1988 4. FEI Number - 65-0070947 5. Certificate of Status Desired 6. Election Campaign Financing			Mailing Address	e of Business	Principal Place
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FL 85 Zip Code		FL	City	1641 City			
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regis 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 register agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE	of changing its registered ointment as registered	in's board of directors. Friereby accept the appoin	ine corporation's board of dire	inorized by the co da Statutes.	Florida. Such change was auti ns of, Section 607.0505, Florid	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the oblig	office or r agent. I a
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	AND DIDECTORS IN 12						0.017110112
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CITY-ST-ZIP 14. 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 annual report of supplemental annual report is the 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

E OF SIGNING OFFICER OR DIRECTOR