## FOR PROFIL CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000091420 Sunglo DESIGNS INC

SIGNATURE:

## **FILED** May 27, 2002 8:00 am Secretary of State 05-27-2002 90419 003 \*\*\*150.00

	DO NOT WRITE	IN THIS SI	PACE			
997	BOXFORD LN	3. Mailing Address 997 BoxF	bed LN			
	pt.#, etc. <u>LEDGE</u> F-L 32955	ROCILLEDG		955	. DO NOT WRITE IN TH	IS SPACE
ROCKL	EDGE FL	City & State  ROCK LLOUE	FL		4. FEI Number 59-3745 749	Applied For Not Applicable
3295	SS Country US	32955	Country	US	5. Certificate of Status Desired	\$8.75 Additional Fee Required
			Name		7. Name and Address of Current Register	
	DO NOT WI	ITE .	ST 57	ADL	ER JERRY L	
			-Suger	Address (F	O.O. Box Number is Not Acceptable)	2 1 L 22 T 2
	IN THIS SP	ACE in the				
			City	CKL	EDGE_	
8 The above	In particular of the second of				F	L 255955
or the above	e named entity submits this statement for t	the purpose of changing its i	registered office o	or registere	ed agent, or both, in the State of Florida.	
SIGNATURE						
	Signature, typed or printed name of registered agent and	outle if applicable. (NOTE:	Registered Agent signa	ture required v	vhen reinstating) DATE	
9. This corp	poration is eligible to satisfy its Intangible	January is Me	y 1: Fee is \$15	0.00		<u></u>
(See crite	requirement and elects to do so. eria on back)	Amended	Fee is \$550.0 UBR is \$81.25		10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be
11.	OFFICERS AND DI	Make Check Payabl	e to Departmen	t of State		☐ Added to Fees
TITLE	$\mathcal{D}$	RECTORS	THE	1		
NAME	JERRY L STADLER 997 BOXFORD LN		NAME			
STREET ADDRESS	ROCKLEDGE FL 3295	<u></u>	STREET ADDRESS	N		
CHTY-ST-ZIP		27	CITY-ST-ZIP			
THE S  WHE MERCARET PERSINGER				100	Control Association (Control Control C	
STREET ADDRESS	MARGARET PERSINGER 1997 BOXFORD LN		NAME			
CITY-ST-ZIP	ROCKLEDGE, FL 32		STREET ADDRESS CITY ST. ZIP 18		and the second of the second of the	
TITLE	, , , , , , , , , , , , , , , , , , , ,				A second and a second second second second second	
NAME			TITLE NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY ST MP			TE
itle Iame			mil sees			territoria de la compania de la comp
TREET ADDRESS			NAME		IN THIS SPACE	JE 🔻
TTY-ST-ZIP			STREET ADDRESS		in a consumption of the second	
ITLE		· -··	CITY-ST-ZIP		A Section of the second section of the section of the second section of the	
AME			TITLE			
TREET ADDRESS	•		STREET ADDRESS			
ITY-ST-ZIP		<del></del>	CITY-ST-7IP			
TLE (			THLE .	<sup>30</sup> (1) (1) (1)	Control of the Contro	
REET ADDRESS			NAME			
TY-ST-ZIP			STREET ADDRESS			
hereby ce	ertify that the information supplied with this	filing does not qualify for the	A STATE OF THE STATE OF T	31.71.11 (A. )		
of the corp attachmen	on this report or supplemental report is true poration or the receiver or trustee empower If with an address, with all others!!	and accurate and that my street to execute this report as	signature shall have required by Cha	u in Sectio ve the sam apter 607 f	in 119.07(3)(i). Florida Statutes. I further cert te legal effect as if made under oath; that I a Florida Statutes; and that my recent	ify that the information m an officer or director