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 # P93000026198

SUNTEC USA INC.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90112 022 ***158.75



							- 11						8111 IBN 1881
Principal Place	e of Business	Mailing Address					111						
C/O PHILIPPE HUG C/O HUGUETT DIONNE													
3014 WEST CR		3014 W. CROWN PTE BL\'D						י סח	NOT WPI	TE IN TH	IS SPAC	F	
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US US							04/01	٠.	Qualifou				
2 District C	lace of Dusings	2a. Mailing Address				+	4. FEI Nui				—::Т	Anr	led For
	ace of Business	⊢				65-04-10699				-		Applicable	
21	# -^-	Suite, Apt. #, etc.			-+						\$8.75 Additional		
Suite, Apt.	#, etc.					5. Certificate of Status Desired Fee Required							
22	_	City & State				-+	C. Floatio	Compaign F	inanaina				flay Be
City & Sate	- :	⊢ . <u></u>	-		-	-		າ Campaign F und Contribut				dded to	
23 Tin	Country	Zip	Col	intry				rporation owe		cont year			
——————————————————————————————————————		· ·	30	,	,			rporation owe at Property Ta		eni year	M Ye		⊡Nο
24	9. Name and Address of Current	29	30	T				and Address		Registere			
	9. Name and Address of Current	Registered Agent		81	Name		10. 110	ana raaroso	OI NOW !	109.0			
DION	NE, HUGUETTE												
	WEST CROWN PTE			82 Street Acd			(P.O. Bo)	Number is No	ot Accept	able)			
	LES FL 34112			83	83								
14646.1	LLO I L OTT I L		1	"									
				84	City					F	85	Zip C	ode
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office crr	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	rf Florida. Such change was	authorized	vd b	the corpo	ooration's	board of d	lirectors. I her	eby acce	pt the apr	ointment	as reg	istered
_													
SIGNATUFE	Signature, typed or printed na ne of registered agent	t and title if applicable. (NOT	E. Registered	Agen	signature r	required w	en reinstating)			DATE			
12.	OFFICERS AN	DIRECTORS	13.				ADDITIC	NS/CHANGE	S TO OF	FICERS			
TITLE	PT	☐ DELETE	1,1 TI	TLE		S					☐ Ch	ange	Addition
NAME	HUG, PHILIPPE		1.2 N	AME									
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14. I heretly certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 (3)(i), Florida Statutes. I further pertify that the information indicated on this annual report or supplemental 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 12 or Block 13 if changed, or on an attacument with an address, with all other like empowered.

SIGNATURE: