

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 DEC -3 PM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800009321058
12/03/02--01061--020 **150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000026974

1. Entity Name

SUNVAC CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1200 MARLIN CT

Suite, Apt. #, etc.

3. Mailing Address
600 GOODLETTE RD N

Suite, Apt. #, etc.
104

City & State
MARCO ISLAND, FL

City & State
NAPLES, FL

4. FEI Number
65-0479239

Applied For
Not Applicable

Zip
34145

Country
US

Zip
34102

Country
US

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
HELEN WATSON

Street Address (P.O. Box Number is Not Acceptable)
600 GOODLETTE RD N #104

City NAPLES FL 34102

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.

SIGNATURE *Helen Watson* Helen Watson

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

11-22-02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPST
KERTSCHER, ANDREAS
1200 MARLIN CT MARCO ISLAND, FL 34145

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-22-02 (234)263-0829

Date

Daytime Phone #

CR2E034B (12/01)

**A BETTER
BUSINESS & TAX SERVICE, INC.**

**A CCURATE
ACCOUNTING & TAX, INC.**



November 22, 2002

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Sunvac Corp.
Document No. P94000026974
2002 Uniform Business Report

Gentlemen:

The original Report was never received. Our office called the Division of Corporations to explain the problem and we were told to write this letter explaining the situation and to have the corporation send it in with the \$150.00.

Check number 1549, in the amount of \$150.00, is enclosed to cover this report.

Thank you.

Sincerely,

Helen Watson
President

/rr

Enclosures