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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name	P94000046148 (0)
THE SUGARHILL GF	ROUP, INC.
Principal Place of Rusiness	Ma fina Addresa

•	Name UGARHILL GROUP, INC	.			
Principal Place	of Business	Maling Address			86117 8811 81918 61191 11811 8188 1801 18
943 NW 16 I Stuart FL : Us		943 NW 16 PLACE STUART FL 34994			
		US		3. Date Incorporated or Qualified 06/20/1994	3a. Date of Last Report 06/20/1995
1	ace of Business	2a. Mailing Address		4. FEI Number 65-0506705	Applied For Not Applica
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additiona
City & State		City & State		6. Election Campaign Financing	Fee Haquired
3		28		Trust Fund Contribution	S5.00 May Be Added to Fees
Zip 4	Country 25	Zip [29]	Country 30	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s. 199.032,
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Ro	egistered Agent
DRURY,	B.C.		81 Name		
	16 PLACE		82 Street Add	lress (P.O. Box Number is Not Acceptabl	le)
	FL 34994		83		
			84 City		
			Oity		FL 85 Zip Code
11. Pursuant to or registere	the provisions of Sections 607.0	0502 and 607 1508, Florida Statu Florida. Such change was authori	tes, the above-named corpo zed by the corporation's boa	ration submits this statement for the purp ard of directors. Thereby accept the appo	pose of changing its registered o pintment as registered agent. I an
SIGNATURE	Signature, typed or printed name of registered	agent and tide it applicable. (N	OTE: Rugistered Agent signature require		pose of changing its registered o cintrnent as registered agent. I an
SIGNATURE	Signature, typed or printed name of registered	agent and tide it applicable. (N AND DIRECTORS	OTE: Rugistered Agent signature require		pose of changing its registered of cintrnent as registered agent. I an DATE CERS AND DIRECTORS IN 12
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I do nereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 attachment with an address.

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SIGNATURE AND TYPEO OR PRINTED WIME OF SIGNING OFFICER OR DIRECTOR

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Date

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