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 # **P94000049794**1. Corporation Name

SUNSHINE SHIPPING & BUSINESS SERVICES, INC.

Fillicipal Flace of Dusiliess
4509 14TH STREET WEST
BRADENTON FL 34207

Mailing Address

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90085 018 ***150.00



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4509 14TH STR BRADENTON FI		4509 14TH STREET WEST BRADENTON FL 34207							
						DO NO	OT WRITE IN THIS	SPACE	
						3. Date Incorporated or Q 06/30/1994	ualifed		
Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For
24		26	H .			65-0500874			Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.						\$8.7	75 Additional
22		27	¬ ' ' '			5. Certifcate of Status De	sired		e Required
City & State			City & State			6. Election Campaign Fina	ancing	\$5.	00 May Be
23		28	1			Trust Fund Contribution	- 11		ded to Fees
Zip	Country	Zip				8. This corporation owes	the current year Inta	ngible	
24	25		30	•		Personal Property Tax.		Yes	MiNo
241	9. Name and Address of Curren		30,			10. Name and Address o		\gent_	
	V1 144114 4114 11414		- 1	81	Name				
ROP	er, douglas l		1			(2.0. D. N			
	14TH STREET WEST		[*	82	Street Add	Iress (P.O. Box Number is Not	Acceptable)		
BRADENTON FL 34207			1	83					
			1	84	City		FI	85	Zip Code
dd Dississed	to the provisions of Sections 607.050	2 and 607 1508 Florida Statute	e the ah		named corr	poration submits this statement	for the numose of o	hangin	a its registered
office or r	to the provisions of Sections 607.050. registered agent, or both, in the State and familiar with, and accept the obligations.	of Florida. Such change was au	uthorized	by th	ne corporati	on's board of directors. I hereb	y accept the appoin	tment a	s registered
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE:	Registered A	Agent s	signature require	ed when reinstating)	DATE		
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES	TO OFFICERS AN		
TITLE	DPS	☐ DELETE	1.1 TITL	Æ				Cha	nge 🔲 Addition
NAME	ROPER, DOUGLAS L		1.2 NAN	ME					
STREET ADDRESS	2006-38TH STREET WEST	•	1.3 STF	REET AI	UDRESS .				
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CIT	Y-ST-Z	ZIP				
TITLE	DVT	☐ DELETE	2.1 TITL	LE				Cha	nge 🗌 Addition
NAME	ROPER, BARBARA L	•	2.2 NAN	ME					į
STREET ADDRESS	ASSA SATIL ATOUT MEAT		2.3 STF	REETA	DORESS				ĺ
CITY-ST-ZIP	BRADENTON FL 34205		2. 4 CIT	TY-ST-	.7IP				
TITLE	DI DEITION LE GIEGO	DELETE	- · · · 3.1 TITL				e a money ta	[] Cha	nge 🔲 Addition
NAME	<u> </u>		3.2 NA	ME			٠	•	
STREET ADDRESS			3.3 STF	REET A	NODRESS				
				TY-ST-					
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITL					Cha	nge
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STF	REET A	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST-Z	ZIP				
TITLE	120%17	☐ DELETE	5.1 TITL	LE	İ	•		☐ Cha	nge 🗌 Addition
NAME			5.2 NAM	ME		<i>,</i> ,	·		
STREET ADDRESS			5.3 STF	REETA	NDORESS				
CITY-ST-ZIP	1		5.4 CIT	Y-ST-Z	ZIP				
TITLE		DELETE	6.1 TIT	LΕ				☐ Cha	nge 🔲 Addition
NAME			6.2 NA	ME			•		
			6.3 STF	REET A	ADDRES\$				
STREET ADDRESS									

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

6.4 CITY-ST-ZIP

SIGNATURE: