FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

P95000010480 (8)

S G & SONS INC.

Suite, Apt. #, etc.

City & State

Zip

24

Principal Place of Business Mailing Address 150 US ONE 177 US ONE TEQUESTA FL 33469 TEQUESTA FL 33469 2. Principal Place of Business 2a. Mailing Address 26

27

28

Suite, Apt. #, etc.

City & State

3. Date Incorporated or Qualified 02/07/1995 4. FEI Number Applied For 65-0553160 Not Applicable \$8.75 Additional

5. Certificate of Status Desired Fee Required Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees

FILED

Jan 23 1998 8:00am

DO NOT WRITE IN THIS SPACE

Secretary of State

Zip Country Country 8. This corporation owes or has paid the current year Intangible 30 Yes 25 29 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

GUINAN, STEVE 1759 U.S. HWY. U.S. ONE SUITE 278 **TEQUESTA FL 33469**

Street Address (P.O. Box Number is Not Acceptable) 83 Zip Code

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE							<u></u> .
	Signature, typed or printed name of registered agent and		Registered Agent signature re		DATE		
12.	OFFICERS AND DIF		13.	ADDITIONS/CHAN	GES TO OFFICERS A		
TITLE	ט	☐ DELETE	1.1 TITLE			L Change	Addition
NAME	GUINAN, STEVE		1.2 NAME				
STREET ADDRESS	16783 96TH TERR. NORTH		1.3 STREET ADDRESS				
CITY-ST-ZIP	JUPITER FL 33478		1.4 CITY-ST-ZIP				
TITLE	D	DELETE	2.1 TITLE			Change	Addition
NAME	GUINAN, GAIL-MARIE		2.2 NAME				
STREET ADDRESS	16783 96TH TERR. NORTH		2.3 STREET ADDRESS		Ė		
CITY-ST-ZIP	JUPITER FL 33478		2. 4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	3.1 TITLE			Change	Addition
NAME	GUINAN, BRIAN		3.2 NAME				
STREET ADDRESS	16783 96TH TERR. NORTH		3.3 STREET ADDRESS				
CATY-ST-ZIP	JUPITER FL 33478		3.4. CITY - ST - ZIP				
TITLE	D	DELETE	4.1 TITLE			Change	Addition
NAME	GUINAN, STEPHEN J		4. 2 NAME				
STREET ADDRESS	16783 96TH TERR. NORTH		4.3 STREET ADDRESS				
CITY - ST - ZIP	JUPITER FL 33478		4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6,2 NAME				
STREET ADDRESS		:	6.3 STREET ADDRESS				

14. I bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 changed, or on an attachment with an address.

SIGNATURE: