

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

FILED
Apr 28, 1999 8:00 am
Secretary of State

04-28-1999 90024 004 ***150.00

DOCUMENT # P95000087291

1. Corporation Name

EVERYTHING UNDER THE SUN, INC.



Principal Place of Business
4002 SOUTH THIRD ST
JACKSONVILLE BEACH FL 32250
US

Mailing Address
4002 S THIRD ST
JACKSONVILLE FL 32250
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/14/1995

4. FEI Number

59-3349098

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HAYES, SHARON
4002 S THIRD ST
JACKSONVILLE BEACH FL 32250

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. 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:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE: PST
NAME: ROTH, MARTA M
STREET ADDRESS: 4002 S THIRD ST
CITY-ST-ZIP: JACKSONVILLE FL 32250

☒ DELETE

TITLE: President
NAME: Sharon Hayes
STREET ADDRESS: 4002 S. 3rd Street
CITY-ST-ZIP: Jacksonville Bch, FL 32250

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: President
1.2 NAME: Sharon Hayes
1.3 STREET ADDRESS: 4002 S. 3rd Street
1.4 CITY-ST-ZIP: Jacksonville Bch, FL 32250

☒ Change ☐ Addition

2.1 TITLE:
2.2 NAME:
2.3 STREET ADDRESS:
2.4 CITY-ST-ZIP:

☐ Change ☐ Addition

3.1 TITLE:
3.2 NAME:
3.3 STREET ADDRESS:
3.4 CITY-ST-ZIP:

☐ Change ☐ Addition

4.1 TITLE:
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY-ST-ZIP:

☐ Change ☐ Addition

5.1 TITLE:
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY-ST-ZIP:

☐ Change ☐ Addition

6.1 TITLE:
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY-ST-ZIP:

☐ Change ☐ Addition

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

SIGNATURE:

Sharon Hayes Sharon Hayes 4-26-99 904-247-4547

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)