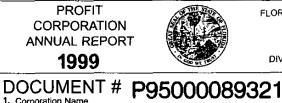
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 10, 1999 8:00 am Secretary of State

05-10-1999 90203 001 ***150.00

|--|

SUN DE	TECTIVE AGENCY, INC.				L LEGALISTA DI CORRECTORIO GLI IL TERMI GRAN GLI IL	HAN I a na Hana Hana	((44) (14) (14)
Principal Plac	e of Business	Mailing Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11007 1701 1001
316 W. CENTRAL AVE. 316 W CENTRAL AVE							
607 607					DO MOT MENTE IN T	UC 0DAOE	
WINTER HAVEN FL 33880 WINTER HAVEN FL 33880					DO NOT WRITE IN THE		
US US					3. Date Incorporated or Qualifed		
					11/21/1995		· · · · · · · · · · · · · · · · · · ·
Principal Place of Business 2a. Mailing Addres		⊢ , •			4. FEI Number	<u> </u>	plied For
21 26					59-3360156		t Applicable
Suite, Apt. #, etc.		<u>⊢</u>	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A Fee Red	
22		27					
City & State		— ·	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	
23 28 28		Zip	Country				0 1 662
Zip	Country		30		This corporation owes the current year Personal Property Tax.		□No
24	9. Name and Address of Currer		30		10. Name and Address of New Register		
	J. Name and Address of Curren	it registered Agent	81	Name			
BUR	NHAM, DARRELL E		L	<u> </u>			
	W CENTRAL AVE		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
#60			83				
	TER HAVEN FL 33880		63				
			84	City		B5 Zip C	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t					-		rogistored
office or r	registered agent, or both, in the State	of Florida. Such change was au	thorized by	the corporati	on's board of directors. I hereby accept the ap	pointment as reç	gistered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flori	da Statutes	· ·			
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Res 12. OFFICERS AND DIRECTORS			Registered Ager	t signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
		□ DELETE	1.1 TITLE		ABBITIONS/OTT/INCES TO STITISEING	Change	Addition
TITLE	•		1.2 NAME				_
NAME	BURNHAM, DARRELL E						
STREET ADDRESS	·			TADORESS			
CITY-ST-ZIP	WINTER HAVEN FL		1.4 CITY-S	T-ZIP		☐ Change	☐ Addition
TITLE	•	- DELETE	2.1 TITLE				
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE				·
CITY-ST-ZIP		— — — — — — — — — — — — — — — — — — —	2 4 CITY-5	ST-ZIP		☐ Change	☐ Addition
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		Change	□ Addition
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				į
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T- ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T 710			1
TITLE				1-212			
		☐ DELETE	6.1 TITLE	1-21		☐ Change	Addition
NAME		☐ DELETE		1-ZIP		☐ Change	☐ Addition
NAME STREET ADDRESS		☐ DELETE	6.1 TITLE 6.2 NAME	T ADDRESS		☐ Change	☐ Addition

CITY-ST-ZIP 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 change, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4-30-99