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 #

Principal Place of Business

P9600007686 (4)

SUN SPIN, INC.

Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



3350 EAST ATLANTIC BLVD. SUITE 300 POMPANO BEACH FL 33062			3350 EAST ATLANTIC BLVD. SUITE 300 POMPANO BEACH FL 33062				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified A1/02/1006			
2. Principal P	lace of Business	28.	Mailing Address				01/22/1996 4. FEI Number			Applied For
21 26							65-0640337			Not Applicable
Sulte, Apt. #, etc. 22			Suite, Apt. #, etc.							Additional
City & State			City & State							Required
23 28							6. Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip ,	Country Zip Cou				itry		8. This corporation owes or has paid	the curr		
24	land A sant	30			Personal Property Tax due June 30. Yes No					
J	9. Name and Address of Currer	п недіві	tered Agent		B1 N	ame	10. Name and Address of New Reg	stered A	gent	
WARREN, PHILIP M 3350 EAST ATLANTIC BLVD.										
SUITE 300						reet Addre	ess (P.O. Box Number is Not Acceptable	•)		
P		1	83							
	•			1	34 Ci	ty		FL	85 Zip	p Code
11. Pursuant	to the provisions of Sections 607,050	2 and 60	7.1508, Florida Sta tul	tes, the ab	ove-na	med corp	poration submits this statement for the pu	rooco 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 profiled name of registered agent and the if applicable (NO1E, Registered Agent signature required when reinstating) DATE										
12.	OFFICERS ANI				Agent sig	nature require		DATE	DIDECT	553.01.5
TITLE	PSTD	DINEC	DELETE	13.	F		ADDITIONS/CHANGES TO OFFICE		DIRECTO Change	
NAME	ROBIN, GREGORY E			1.2 NAN					Onlings	, LI Addition
STREET ADDRESS	1280 S. POWERLINE RD., #	744		•	EET ADDE	RESS				
CITY-ST-ZIP	POMPANO BEACH FL 3306	9			'-\$1-2IP					
TITLE			DELETE	2.1 TITL	E				Change	Addition
NAME				2.2 NAN	IE					
STREÉT ADDRESS				2.3 STR	EET ADDA	ESS				
CITY-ST-ZIP					Y-ST-ZIF	·				
TITLE			L_ DELETE	3.1 TITL	E			l	Change	Addition
NAME				3.2 NAN	ΙE					ŀ
STREET ADDRESS					ET ADDR	1				ı
CITY-ST-ZIP TITLE			DELETE		/-ST-ZIP	<u>'</u>		· · · · · · · · · · · · · · · · · · ·		
NAME			☐ DECE 15	4.1 7171				ι	Change	L Addition
STREET ADDRESS				4. 2 NAM						
				1	ET ADDR					
CITY-ST-ZIP TITLE			DELETE	5.1 TiTL	- ST - ZIP				Change	Addition
NAME				5.1 MAM				L	Change	☐ Addition
STREET ADDRESS					e Et addr					
CITY-ST-ZIP										
TITLE			DELETE	6.1 TITU	-ST-ZIP	-		ī	Change	Addition
NAME				6.2 NAM	-	ĺ			-1 CylanRe	
STREET ADDRESS					l et addr	FSS				
CITY-ST-ZIP				6.4 City						
dd Lharabu a	artification in formation a continuous			V.4 (J111	31-217					

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of its true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annua officer or director of the Block 12 or Block 13 if