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

PROFIT CORPORATION ANNUAL, REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🗼

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000031401 (8)

H. H. SUNINVEST, INC.

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Principa	Piace of	Business

Mailing Address

## FILED May 16 1997 8:00am Secretary of State



5129 CASTELLO DR. NAPLES FL 33940	SUITE 2	S128 CASTELLO DR. SUI NAPLES FL 84180-1908	IEZ		
				3. Date Incorporated or Qualified 04/04/1996	3a. Date of Last Report
2. Principal Place of	if Business	2a. Mailing Address		4. FEI Number	Applied For
5100 N.	TAMIAMI TRAIL	26 5117 Casy	tello.Drive	65-0662279	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional
22 SUITE 2	01	27 SUITE 1		G. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 Мау Ве
23 NAPLES,	FLORIDA	26 NAPLES, F	LORIDA	Trust Fund Contribution	Added to Fees
- Z(p	Country	Zip	Country	8. This corporation has liability for	
24 34103	25 U.S.	29 34103	30 U.S.	Florida Statutes  10. Name and Address of New Ro	Yes K No
	Name and Address of Current	Registered Agent	81 ***	10. Name and Address of New Hi	Agistered Agent
	ICH, DAVID J Stello DR, Suite 2 Fl 33940		B2 Street	mes W. Ambum Andress IP.O. Box Number is Not Accepta 7 Castello Prive	ole)
. /	$\gamma$	$\gamma_{\alpha}$		DESCRIPTION OF THE PROPERTY OF	FL 85 Zip Code
11. Pursuant to the	provisions of Sections 607.0502	in 607.1508, Florida Stat	utes, the above-name	corporation submits this statement for the	purpose of changing its registered
office or registe	ered agent, or both, in the State of	of florida. Such change was	s authorized by the co. Florida Statutes	rporeiton's board of directors. I hereby acce	pt the appointment as registered
DIOMATURE	I dearth ) Lil		AMOS W	AMBURN 4	BO 67
SIGNATURE Electrical	yped or printed name of recreticined agen	t and title if applicable. (No	OTE Registered Agent algoatur	e required when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE   V		DELETE	1.1 T\TLE	VP	Change Addition
NAME			1.2 NAME	Werner Nagel	
STREE: ADDRESS			1.3 STREET ADDRESS	5117 Costello Drive	
C-TY-ST-ZiP		T-3	1.4 CITY-ST-ZIP	NAPLES, FLORIDA 34	103
THLE		DELETE	2.1 TITLE		Change Additio
NAME			2.2 NAME	<b>\</b>	
STREET ADDRESS			2 3 STREET ADDRESS	1	
CHY-ST-7IP			2.4 CITY-ST-ZIP		
1011		DELETE	3.1 TITLE		Change Additio
NAME			3.2 NAME		
STRUET ADDRESS			3 3 STREET ADDRESS		
C-TY - ST - ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Additio
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-\$1-ZiF			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Additio
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
C(1Y S1-70)			5.4 CITY-ST-ZIP		
101.6		DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CiTY-ST-ZIP			6,4 CITY - ST - ZIP		
	rtify that the information supplied	with this filing does not au		stated in Section 119.07(3)(i), Florida Statut	es. I further certify that the

and the energy carmy that the information supplies with its image over not quality in the exemption state in resolution in the exemption is an interest in the energy of the energy of the energy of the exemption information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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.