

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000078198 (4)**

1. Corporation Name

SUN TELECOMMUNICATIONS, INC.

Principal Place of Business

**350 W. CAMINO GARDENS BLVD #201
BOCA RATON FL 33432**

Mailing Address

**350 W. CAMINO GARDENS BLVD #201
BOCA RATON FL 33432**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/18/1996

4. FEI Number **65-0750472**

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business
21 **777 E. Atlantic Avenue**

2a. Mailing Address
26 **c/o Paul Dalton, CPA**

Suite, Apt. #, etc.
22 **Suite 100**

Suite, Apt. #, etc.
27 **124 N. Main St.**

City & State
23 **Delray Beach, FL 33483**

City & State
28 **Forked River, NJ 08731**

Zip
24 **33473**

Country
25 **USA**

Zip
29 **08731**

Country
30 **USA**

9. Name and Address of Current Registered Agent

**KING, BRIAN E
350 W. CAMINO GARDENS BLVD #201
BOCA RATON FL 33432**

10. Name and Address of New Registered Agent

81 Name **Brian E. King**

82 Street Address (P.O. Box Number is Not Acceptable)
777 E. Atlantic Ave

83 **Suite 100**

84 City **Delray Beach** **FL** 85 Zip Code **33483**

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, as shown 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 of officer or director of corporation and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **KING, BRIAN**
STREET ADDRESS **350 W. CAMINO GARDENS BLVD #201**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **777 E. Atlantic Ave., Suite 100**
1.4 CITY-ST-ZIP **Delray Beach, FL 33483**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 a 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 checked or as an attachment with an address.

SIGNATURE:

CR2E034 (10/97)