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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000092370 (1) DOCUMENT # 1. Corporation Name

SUSTINA, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				T I BODINGAL HIG BANKE ONAN ARTHY GANN GANN ARTHY BOND HOUR HIGH HIGH HIGH HIGH HIGH HIGH HIGH HIG				
3201 NORTH SR 19 A 3201 NORTH SR 19 MOUNT DORA FL 32757 MOUNT DORA FL 32			DO NOT WRITE IN THIS SPACE					
	_				3. Date Incorporated or Qualified 11/07/1996			
⊢	Place of Business	2a. Mailing Address				ied For		
Suite, Apt	# etc	Suite, Apt. #, etc.				Applicable		
22		27			5. Certificate of Status Desired Fee Requ			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip			Country			8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30. 🔣 Yes 🔲 N			
	g. Name and Address of Curr	10. Name and Address of New Registered Agent						
	ORDON, CHRISTINA I		81	Name	ne			
	0 VINCENT DR DUNT DORA FL 32757		82 Street Add		et Address (P.O. Box Number is Not Acceptable)			
MIOON E 92/3/			83	1				
			84	City	FL 85 Zip Cox	de		
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 Statutés.								
SIGNATURE Signature, typind or profited name of registered agest and title of applicable (NOTE Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12		
TITLE	P DELETE			1.1 TITLE		_] Addition		
NAME	GORDON, CHRISTINA I 700 VINCENT DR		1.2 NAME		12 E. MAIN - RILEY'S PACK			
STREET ADDRESS	MOUNT DORA FL			T ADDRESS	MT. DOKA, FIA. 32757	ļ.		
CITY-ST-ZIP TITLE	ST ST	▼ DELETE	1.4 CITY - 2.1 TITLE	ST-ZIP		Addition		
NAME	MOJICA, JESUS A	Z bitti	2.1 THE		Change	Aubition		
STREET ADDRESS	700 VINCENT DR			T ADDRESS	·			
CITY-ST-ZIP	MOUNT DORA FL		2. 4 CITY-					
TITLE		☐ DELETE	3.1 TITLE	D1 211	Change	Addition		
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	ADDRESS	s i			
CITY-ST-ZIP	IP		3.4. CITY-	ST-ZIP				
TITLE	DELETE 4.1 T		4.1 TITLE		Change L	Addition		
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS	s			
CITY-\$T-ZIP			4.4 DITY-5	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change C	Addition		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET		5			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S	IT-ZIP		Addition -		
NAME		►1 DEFEIF	6.1 TITLE		L Change L	Addition		
STREET ADDRESS			6.2 NAME	ADDRESS	,			
CITY-ST-ZIP			6.3 STREET		,			
	pertify that the information supplied	with this filing does not qualify fo	6.4 CITY-S or the exemp	tion state	Lated in Section 119.07(3)(i), Florida Statutes. I further certify that the info	ormation		

indicated on this annual report or supplicmental 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.