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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000011267

1. Corporation Name

SUNSTATE INDUSTRIES, INC.

Principal Place	of Business	Mailing Address					T 1881/881 210 1841 1801 8811 8011 0011 0010	ı ildəlikar ı ilətə i	14101 1 66 1 1 36 1
5004 TAMPA WEST BLVD TAMPA FL 33634 US		5004 TAMPA WEST BLVD TAMPA FL 33634 US			DO NOT WRITE IN THIS	S SPACE			
00	•					- 1	Date Incorporated or Qualifed 02/03/1997		
— ·	lace of Business	2a. Mailing Address	¬			- 1	FEI Number 59-3429050		olied For Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Certificate of Status Desired	\$8.75 A		
City & State	e	City & State				Election Campaign Financing	\$5.00	May Be	
23		28	Cour	ntn.			Trust Fund Contribution	Added to	Fees
Zip 24	Country 25	Zip [30	iii y			This corporation owes the current year In Personal Property Tax.		□No
1	9. Name and Address of Curren	t Registered Agent				10.	Name and Address of New Registered	Agent	
				81	Name		·		
WEINBREN, DON B 101 EAST KENNEDY BOULEVARD				82	Street Address (P.O. Box Number is Not Acceptable)			-	
	E 2700 PA FL 33602			83					
17AM	, , , , , , , , , , , , , , , , , , ,			84	City		FL	85 Zip C	ode
office or re agent. I a	egistered agent, or both, in the State in familiar with, and accept the obligation.	of Florida. Such change was at tions of, Section 607.0505, Flor	ithorized ida Statu	by in ites.	named corporation	ion's boa	submits this statement for the purpose of and of directors. I hereby accept the appointment of the purpose of t	intment as reg	registered
12.	Signature, typed or printed name of registered ager	ID DIRECTORS	13.	Agents	agnatura require		DDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	P OFFICERS AN	DELETE	1.1 111	LE .				Change	Addition
NAME	EMLITZ, PETER M		1.2 NAME		3	SEM.	MTZ, PETERM	-	ļ
STREET ADDRESS	3913 LITTLE EGRET CT		1.3 STREE		DDRESS /	600	LITZ, PETEL M 15 BURNHAM WAY		ĺ
CITY+ST-ZIP	LUTZ FL 33549		1.4 CITY-ST		ZIP 7	TAM.	PA, FL 33647		
TITLE	S	. DELETE	2.1 TIT	2.1 TITLE			The same of the sa	Change	☐ Addition
NAME	SEMLITZ, EDWARD F		2.2 NAME		١,		2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		ne l
STREET ADDRESS	AND DESCRIPTION OF AUGUS		2.3 STI	2.3 STREET ADDRESS		313	BOCA CATON WOOD RATON, FL3346	15 HIN	
CITY-\$T-ZIP	TAMPA FL 33613		2. 4 Cl		ZIP	<u> 80CA</u>	RATION, FLOOTO	Change	Addition
TITLE		☐ DELÉTÉ	3.1 TITLE				•	□ Change	☐ Madition
NAME			3.2 NAME						
STREET ADDRESS			- 1		DDRESS				
CITY-ST-ZIP TITLE		☐ DELETÉ	3.4. CITY-:		ZIP			Change	Addition
NAME		_	4. 2 NAME						
STREET ADDRESS			4.3 STREET		DDRESS				
CITY-ST-ZIP	•		4.4 CITY-ST		ZIP				
TITLE		☐ DELETE	5.1 TTT	5.1 TITLE				Change	Addition
NAME	•		5.2 NA				•	,	İ
STREET ADDRESS					ADDRESS				Į
CITY-ST-ZIP				TY-ST-	ZIP			Change	Addition
	56 <u>£</u> .	☐ DELETE	6.1 TIT				•	Change	
NAME O			6.2 NA 6.3 ST		ADDRESS .				ļ
STREET ADDRESS	I SETATION IN THE SET OF THE SETATE OF THE S		0.00						I

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 suppliemental 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, with all other like impowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP "