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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000012636 (1)

GIESCO SUN POINTE INC.

Principal Place of Business	Mailing Address			
701 EAST BAY DRIVE	ATTN: RICHARD H SOLLNER, ESO			
LARGO FL 36461	P.O. BOX 1102			
	TAMPA FL 33001-1102			

FILED Mar 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						I HADIIADI IKA ISKIN HADII ABINI DONI KANIN DONI KANIN DONIK KANIN DONIK KANIN DONIK KANIN DONIK KANIN D				
701 EAST BAY DRIVE LARGO FL 36461		P.O. BOX	ATTN: RICHARD H SOLLNER. ESO P.O. BOX 1102 TAMPA FL 33601-1102			DO NOT WRITE IN THIS	SPACE			
						3. Date Incorporated or Qualified				
2. Principal P	lace of Business	2s, Mailing	Address			02/07/1997 4. FEI Number		valled Car		
	IECO OF DUBITIONS	·	Addiess			59-3434110		oplied For ot Applicable		
Suite, Apt.	# etc	26] Suite #	pl. #, etc.				\$8.75			
22	.,	27	η », οιο.			5. Certificate of Status Desired	Fee Re			
City & Stat	9	City & S	State			6. Election Campaign Financing	\$5.00			
23		28				Trust Fund Contribution	Added (
Zip	Country	Zip		Countr	у	8. This corporation owes or has paid the cur	rent year Int	angible		
24	25	29		30] No		
	g. Name and Address of Cu	urrent Registered Ag	gent			10. Name and Address of New Registered	Agent			
80	LLNER, RICHARD H			81	Name					
	00 BARNETT PLAZA			82	Street A	ddress (P.O. Box Number is Not Acceptable)				
101	1 E KENNEDY BLVD			L						
TAI	MPA FL 33602			83	1					
				84	City		85 Zip (Code		
						<u>FL</u>	<u>. </u>			
office or r	to the provisions of Sections 607 registered agent, or both, in the t im familiar with, and accept the c	State of Florida, Such	change was a	uthorized b	v the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the app	i changing it iointment as	ts registered registered		
SIGNATURE	arriar with, and accops the	Simgenoris of, cooker	1001.0300,110	nad Oldiok						
SIGNATURE	Signature, typed or printed name of register	ed agent and little if applicable	e (NOTE	Registered Aç	ent signature r	required when reinstating) DATE				
12.	·	S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND				
TITLE	D		DELETE	1.1 TITLE		•	☐ Change	Addition		
NAME	SHEWER, LLOYD			1.2 NAME						
STREET ADDRESS	1 PLACE VILLA MARIE, S				T ADDRESS					
CITY-ST-ZIP	MONTREAL, QUEBEC, CA	ANADA H3B -4M6	T Locieve	1.4 CiTY-	ST-ZIP		T 1 60	The second		
TITLE			☐ DEFELE	2 1 TITLE				Addition		
NAME				2.2 NAME				ŀ		
STREET ADDRESS					ADDRESS			l		
CITY-ST-ZIP			DELETE	2.4 CITY-	ST-ZIP	<u></u>	Change	☐ Addillon		
TITLE			ויי) מננכונ	3.1 TITLE						
NAME PERCET ADDRESS				3.2 NAME	T 40000000			·		
STREET ADDRESS				1	T ADDRESS					
CITY-ST-ZIP TITLE		- 	DELETÉ	3.4. CITY- 4.1 TITLE	31.71L		☐ Change	Addition		
NAME				4. 2 NAME	1					
STREET ADDRESS					T ADDRESS			ļ		
CITY-ST-ZIP				4.4 CITY-						
TITLE			DELETE	5.1 TITLE	V1 4R		Change	Addition		
NAME				5.2 NAME						
STREET ADDRESS					T ADDRESS					
CITY-ST-ZIP				5.4 CITY-						
TITLE			DELETE	6.1 TITLE			Change	Addition		
NAME				6.2 NAME				_ :		
STREET ADDRESS	ı.				T ADDRESS			. [
CITY+ST-ZIP				6.4 CITY-						
		- 17 1		V.5 Q.11						

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 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 in an attachment with an address.