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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000024417 (2)

SUNSTONE VENTURES, INC.

FILED May 11 1998 8:00am Secretary of State



4/15/98 941-493-4858v2006

Principal Place of Business Mailing Address					
1139 WILLIS AVE. 1139 WILLIS AVE.					
SARASOTA FL 34232 SARASOTA FL 34232				DO NOT MIDNE IN THE OFFICE	
					DO NOT WRITE IN THIS SPACE
•		•			3. Date Incorporated or Qualified
6 Disalas D	loos of Dusiness	Da Marillian Address			03/11/1997 4. FEI Number Applied For
	Place of Business CORAL ROAD 26. Mailing Address CORAL ROAD 26. 209 CORAL ROAD			CF 0/500/7	
	1 209 CORAL ROAD 26 209 CORAL RO Suite Apt. #, etc. Suite Apt. #, etc				65-0652967 Not Applicable \$8.75 Additional
22 27					5. Certificate of Status Desired Fee Required
City & State	9	City & State			Election Campaign Financing \$5.00 May Be
	ENICE, FLORIDA ZE VENICE, FLORIDA				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		This corporation owes or has paid the current year Intangible
24 342	93 USA	0/000 t	30 USA		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current				10. Name and Address of New Registered Agent
STO	OLTE, DOROTHY A			1 Name	
1 				2 Street	Address (P.O. Roy Number is Not Acceptable)
SARASOTA FL 34232~				209	Address (P.O. Box Number is Not Acceptable) 9 CORAL ROAD
.	710011112 01202		Ē	3	
	•		ļ.,	4 03.	las I 7:- O. J.
l			°	4 City VEN	NICE FL 85 34293°
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the abo	ve-named	corporation submits this slatement for the purpose of changing its registered
office or re	egistere d agent, or both, in the State on familiar with land accept the obligation	of Florida, Such change was a ions of Section 607.0505. Flo	utherized rida Statul	by the corp es.	poration's board of directors. I hereby accept the appointment as registered
=					
SIGNATURE	Signature, typod or printed name of registered agent	and fire if appticable (NOT)	Registered /	gent signature	required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	[_] DELETE	1.1 TITU	: [Change
NAME	STOLTE, MARGARET L		1.2 NAM	ε	
STREET ADDRESS	-1130 WILLIS AVE		1.3 STR	ET ADDRESS	209 CORAL ROAD
CITY-ST-ZIP	GAPASOTA FL 34232		1.4 CITY	- ST- ZIP	VENICE, FLORIDA 34293
TITLE	T	☐ DELETE	2.1 TITU		Change Addition
NAME	STOLTE, DOROTHY A		2.2 NAM	E [
STREET ADDRESS	1100 WILLIC AVE		2.3 STRI	ET ADDRESS	209 CORAL ROAD
CITY-ST-ZIP	-CARACOTA FL-04232		2.4 CIT	∕-ST-ZIP	VENICE, FLORIDA 34293
TITLE		☐ DELETE	3 1 1111		Change Addition
NAME			3.2 NAM	₹	
STREET ADDRESS			3.3 STRE	et address	
CITY-ST-ZIP			3.4. CIT	r-\$1-ZIP	
TITLE		☐ DELETE	4.1 Till i		Change Addition
NAME			4. 2 NAM	Æ	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP			4.4 CITY	-ST-ZIP	
TITLE		☐ DELETE	5.1 THU		Change Addition
NAME			5.2 NAM	F	75
STREET ADDRESS			5.3 S1R6	ET ADDRESS	ا ا ا
CITY-ST-ZIP			5.4 CITY	- ST - ZIP	<u></u>
TITLE		☐ DELETE	6.1 T(TL)		Change Addition
NAME			6.2 NAM	E	800002523668 -05/14/9801060044
STREET ADDRESS			63STRE	ET ADDRESS	-U5/14/38U1UbUU44
CITY-ST-ZIP				-ST-ZIP	***150.00
14. I hereby o	ertify that the information supplied with on this annual report or suppliered at	this filing does not qualify for	r the exen	ption state	ed in Section 119.07(3)(i). Florida Statutes. I further certify that the information prature 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 of an attachment with an address.					