

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

FILED  
Feb 02 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000026238 (0)  
1. Corporation Name  
SUNTASTIC INC.



Principal Place of Business

4837 N.W. 57 LANE  
CORAL SPRINGS FL 33067

Mailing Address

4837 N.W. 57 LANE  
CORAL SPRINGS FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1997

4. FEI Number

65-0737386

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$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 9776 Beach Blvd

Suite, Apt. #, etc.

2a. Mailing Address

26 9776 Beach Blvd

Suite, Apt. #, etc.

City & State

23 Jacksonville FL

Zip

24 32246

Country

25 USA

City & State

28 Jacksonville FL

Zip

29 32246

Country

30 USA

9. Name and Address of Current Registered Agent

OLIN, MITCHELL  
1290 OAKLAND PARK BLVD.  
SUITE 101  
FT. LAUDERDALE FL 33334

10. Name and Address of New Registered Agent

81 Name

Adrian Minor

82 Street Address (P.O. Box Number is Not Acceptable)

9776 Beach Blvd

83

84 City

Jacksonville

FL

85 Zip Code

32246

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 Statutes.

SIGNATURE X

Signature, typed name and title of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/26/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME BICKLER, BLAIR  
STREET ADDRESS 4837 N.W. 57 LANE  
CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE VPD ☐ DELETE

NAME MINOR, ADRIAN  
STREET ADDRESS 4837 N.W. 57 LANE  
CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
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

1.4 CITY-ST-ZIP

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 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. I am attaching with an address.

CR2E034 (10/97)