May 05, 1999 8:00 am Secretary of State

05-05-1999 90206 009 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000026486

NAME

STREET ADDRESS CITY-ST-ZIP

SUNPOWER PROMOTIONS, INC.

Principal Place	e of Business		Mailing Address				* 1981189		iti mmetr Amter (			
C/O FAST-TAX			C/O FAST-TAX									
113 NORTH FEDERAL HWY			113 NORTH FEDERAL HWY				NO HOT HIDITE WITHIN COLOR					
DANIA FL 33004			DANIA FL 33004				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed					
						••	03/19/19		meu			
a Delevier D	land of Duniana		0 - Mailing Address				FEI Number				Anni	led For
<del></del> ,	lace of Business	F	2a. Mailing Address			1				F	<del></del>	Applicable
Suite Apt # etc			Suite, Apt. #, etc.				65-0762334				\$8.75 Additional	
Suite, Apt. #, etc.			27 Suite, Apr. #, etc.			5.	5. Certificate of Status Desired Fee Required					
City & State			City & State				Election Ca	mnaign Financ		\$5	.00 N	lav Bo
23			28				6. Election Campaign Financing Trust Fund Contribution				Added to Fees	
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24		ress of Current Re	<del></del>	<del></del>		10.	Name and	Address of N	ew Registe	red Agrot		
		-	<u> </u>		81 Name	CN	24/15	Mar	MS			
JACI	KSON, LISA	-			82 Street	Address 10	O BOY Non	nber is Not Ac	rentable)			
<del>- 2647</del>	LEE ST.			, l	oz Sireer		VA 51	アラガズ	cepiaolo)			
HOL	LYWOOD FL 33020	<b>_</b> _	//	ĺ	83	1/2	Mass	I con	RAL	416	44/4	W
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			X1		City .	DAN	la .	BEACH		FL  85	330	84
11. Pursuant	to the provisions of Se	ections 607.0502 an	d 607.1508, Florida Statut lorida. Suck Ebrige was a s of, Section 607.050s, Flo	tes, the ab	ove-named	corporation	submits this	s statement fo	r the purpos	e of changi	ng its re	egistered
office or r	egistered agent, or bo	th, in the State of FI	lorida. Such change was a	azithor zed	by the corp	oration's bo	ard of direct	tors. I hereby a	accept the a	ppointment	as regi	stereo
	in jalilliai with, and ac	cept the obligations		11	- 11	619TE	VED	Alan	7	4-2.	3-9	9
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SIGNATURE		me of registered agent and OFFICERS AND D		E Registered /	Agent signature	required when re	instating)	CHANGES TO	DAT OFFICER	S AND DIR	ECTOR	
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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, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

CR2E034 (11/98)