FILED Jul 23, 1999 8:00 am Secretary of State

07-23-1999 90001 009 ***150.00

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AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, WINDHUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE Katherine Mauris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P97000104816
STINSHINE ONLINE	INC.

Principal Place of Business

Mailing Address

1109 NW 8TH BOYNTON BEA		1109 NW 8TH BOYNTON BE	i street Each FL 33428			DO NOT WRITE 3. Date incorporated or Qualified	IN THIS SPACE	
Ì						01/01/1998		į
<u> </u>	lace of Business	2a. Mailing Ad	dress			4. FEI Number	X	Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt	#, etc.			S. Certificate of Status Desired		5 Additional Required
City & Stat	8	City & Sta	ite	ستر، سید		6. Election Campaign Financing Trust Fund Contribution		0 May Be
Zip	Country	Zip 29	30	Country		This corporation owes the current intangible Personal Property.	nt year Yes	D No
24	9. Name and Address of Current	7.77		"		10. Name and Address of New Re	gistered Agent	_
/ 	S. INSINO SINO AGGIVES OF CUITARI	Average and select		81 N	lagr~			
452	RPORATE CREATIONS ENTERPRIS 1 PGA BOULEVARD #211	SES, INC.		82 S	7	ess (P.O. Box Number is Not Acceptable	le)	
PAL	M BEACH GARDENS FL 33418)	83				
				84			FL	(
			ude Statuton t	the ebour con	ned comor	ration authorite this statement for the purp	ose of changing its	registered
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6.4 CITY-ST-ZIP 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 exceptionally Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-81-21P

TITLE

NAME

DELETE

Change Addition

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