PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

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

04-23-1999 90140 031 ***150.00

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DOCUMENT # P97000107226

. Corporation Name

WEINKO	SUN INVESTMENTS, INC.					
Principal Plac	e of Business	Mailing Address	<u> </u>	1 (APROPE PER INTIN CANEE DOUT I	IBIII 9918: IIAII Agili IAAIB sidid	1 (2 011) 1 (1) 1 (1)
25161 PENNYROYAL DR . 25161 PENNYROYAL DR BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134				DO NOT WE	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifer	d	. 1
		 		01/01/1998	1 14-	
	lace of Business	2a. Mailing Address		4. FEI Number 65-0808-648.	} -	plied For at Applicable
21		26		03-0408-644	_ \$8.75	
	ite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	11 *****	equired
City & Stat		City & State		6. Election Campaign Financing	4	May Be
		28		Trust Fund Contribution		to Fees
23 Zip	Country	Zip	Country	8. This corporation owes the cu	ment vear Intangible	
24	25		ю	Personal Property Tax.	Yes	M⊠
	9. Name and Address of Curren		<u> </u>	10. Name and Address of New	Registered Agent	
			81 Name			
	vikauff, ursula		82 Street A	Address (P.O. Box Number is Not Accep	table)	
	31 PENNYROYAL DR		02 308617	COLOGIA (F. CO. DON FRANCO) TO FRANCO		
BON	IITA SPRINGS FL 34134		83			
			84 City		85 Zip (Code
			11'		FL [**)	
office or r	registered agent, or both, in the State	of Florida. Such change was aut	thorized by the corpo	ration's board of directors. I hereby acc	apt the appointment as re	gister ou
SIGNATURE	Signature, typed or printed name of registered age	int and little if applicable. (NOTE: F	Registered Agent signeture re		DATE	
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN		Registered Agent signature re	quired when reinstating) ADDITIONS/CHANGES TO O	DATE	
SIGNATURE 12.	Signature, typed or protein name of registered age OFFICERS AN	int and title if applicable. (NOTE: F	Registered Agent signature re 13. 1,1 TITLE	ADDITIONS/CHANGES TO O	DATE FFICERS AND DIRECTO	ORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN D KOWALSKY, HORST	int and title if applicable. (NOTE: F	Registered Agent signature re 13. 1,1 TITLE 1,2 NAME	autred when reinitations) ADDITIONS/CHANGES TO O GROWN KI, VOIKER Am Sautzenwald 5	DATE FFICERS AND DIRECTO Change	ORS IN 12
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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 suppliemental 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.

SIGNATURE:	SIGNATURE A	NO TYPED OR PRINTED	NAME OF
··— ····	1/.		

Volker Gronki

5-6-99

941-498-1387