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 # P97000108446

1. Corporation Name

SUPER TAN ILING

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90177 006 ***150.00



JOI CIT	rate ii iito						
Principal Place of Business Mailing Address					<u>. </u>		4 INDICADO ASO SENICADAS DOCES OBJET MOINT FINES DOCE DANS COLOR DELL'ANDI
1100 S FEDERAL HWY. STE 4 1100 S FEDERAL I							
BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435				•			DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed
							12/26/1997
2 Principal P	lace of Business	2a. 1	Mailing Address				4. FEI Number Applied For
21	::::= 2: ===::===	26	U				65-0818046 Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22	المراجع المستعملات المستعملات الماسات	27.					5. Certificate of Status Desired Fee Required
City & Stat	te		City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country		Zip Country				8, This corporation owes the current year Intangible
24	25	29		30			Personal Property Tax. Yes No
	9. Name and Address of Curre	ent Registe	rea Agent		1	Name	10. Name and Address of New Registered Agent
€U∧	'ETTE, SHERRY			"	_		
1100 S FEDERAL HWY, STE 4				8	2	Street Ad	ddress (P.O. Box Number is Not Acceptable)
	NTON BEACH FL 33435			9	3		
501	MON DENOTITE GOTOG				٦		
	•			8	4	City	FL 85 Zip Code
dd Dieniant	to the previous of Sections 507.05	02 and 602	1509 Elorida Statuto	e the abo	1	-named co	orporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the Stat	e of Florida	. Such change was au	thorized b	W I	he corpora	ation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of, S	Section 607.0505, Flori	da Statute	es.		
SIGNATURE			malicable (NOTE: I	Begintered A	annt.	cianat Ira reau	uired when reinstating) DATE
12.	Signature, typed or printed name of registered et OFFICERS A		.,	13.	yeri	signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE	:		☐ Change ☐ Addition
NAME	GOYETTE, SHERRY			1.2 NAM	E		
STREET ADDRESS		4		1.3 STR	£Τ	ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	•		1.4 CITY	-ST-	-ZIP	
TITLE	BOTH ON BEACHTE GOTOS		☐ DELETE	2.1 TITLE			Change Addition
NAME				2.2 NAM	Е		
STREET ADDRESS				2,3 STR	ĒΤ	ADDRESS	
_CITY-ST-ZIP			·	2.4 CITY			and the second of the second o
TITLE			☐ DELETE	3.1 TTILE			Change Addition
NAME				3.2 NAM	E		
STREET ADDRESS				3,3 STR	EΤ	ADDRESS	
CITY-ST-ZIP				3.4. CITY			
TITLE			☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME				4, 2 NAM	ΙE	Í	
STREET ADDRESS				4,3 STRE	ET.	ADDRESS	
CITY-ST-ZIP			•	4,4 CITY			
TITLE			☐ DELETE	5.1 TITL			. Change Addition
NAME				5.2 NAM	E		
STREET ADDRESS				5,3 STRE	ET,	ADDRESS	
CITY-ST-ZIP				5.4 CITY	-ST	-ZIP	
TITLE			☐ DELETE	6.1 TITL	=		Change Addition
NAME				6.2 NAM	Ε	İ	
STREET ADDRESS				6.3 STR	ET	ADDRESS	
CITY-ST-ZIP	Į.			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, or on an attachment with an address, with all other like empowered.