PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000012918

1. Corporation Name

SUNTECH FIRESTOPPING, INC.

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

03-23-1999 90007 035 ***150.00



	· · · · · · · · · · · · · · · · · · ·												
Principal Place of Business Mailing Address													
1304 SOUTHWEST 160TH AVENUE. #636 1304 SOUTHWEST 160TH AVENUE. #6						36							
SUNRISE FL 33326 SUNRISE FL 33326								DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualifed	51 740				
								02/10/1998					
2. Principal Place of Business 2a. Mailing Address								4. FEI Number			plied For		
<u> </u>			26					65 0818490	ŀ		t Applicable		
21 Suite Apt. #, etc.		Suite-Apt. #, etc.									Additional		
22		27						Certificate of Status Destred		Fee Re			
City & State			City & State					6. Election Campaign Financing S5.00 May Be					
23			28					Trust Fund Contribution Added to Fees					
Zip	Country	Γ,	Zip	Çoı	ıntry			3. This corporation owes the current year	Intangibl	e	,		
24	25		30				Personal Property Tax.						
	Name and Address of Current	Regi	stered Agent			" *,). Name and Address of New Register	ed Agen	t			
					81	Name	•						
WEISSMAN, HAROLD ESQ.					82 Street Addr			(P.O. Box Number is Not Acceptable)					
1776 PINE ISLAND ROAD					62 Street Add			(i.e. box riambo) to riet rieseptasis,					
SUITE 118					83								
PLANTATI	ON FL 33322				84	City		<u> </u>	- 85	Zip (`ode		
					04	City		F	FL °°	~"`	5000		
11. Pursuant to the	provisions of Sections 607.0502	and (607.1508, Florida Statut	es, the a	bove	e-name	d corpor	on submits this statement for the purpose	of chang	lng its	registered -		
office or register	red agent, or both, in the State of illiar with, and accept the obligation	Flori	ida. Such change was a	uthonze	d bv	the cor	poration	board of directors. I hereby accept the ap	pointmen	it as re	gisterea		
ļ	mas with, and accept the congula		1, 0004011 001 10000, 7 10			•					•		
SIGNATURE	are, typed or printed name of registered agent a	nd title	if applicable. (NOTE	Registered	Agen	t signature	required v	n reinstating) DATE					
12.	OFFICERS AND	DIR	ECTORS	13.				ADDITIONS/CHANGES TO OFFICERS					
TITLE D			☐ DELETE	1.1 T	MLE		V /	D		hange	Addition		
NAME HIN	ids, sheryl			1.2 N	AME		'						
STREET ADDRESS 130	4 Southwest 160th Aven	UE,	#636	1.3 S	TREET	ADDRES	3						
CITY-ST-ZIP SUN	NRISE FL 33326			1.4 C	ITY-S	T- ZIP	<u> </u>						
пітт Д			☐ DELETE	2.1 T	TLE		P/	Ď.		hange	☐ Addition		
NAME ZAN	MUDIO, MICHAEL			2.2 N	AME		'						
	4 SOUTHWEST 160TH AVEN	UE,	#636	23 S	TREET	ADDRES	s			سنحد			
	NRISE FL 33326			2.40	ITY-S	T-ZIP							
TITLE			☐ DELETE	3.1 T	TLE					hange	☐ Addition		
NAME				3.2 N	AME			•					
STREET ADDRESS	•			3.3 S	TREET	ADDRES	3						
CITY-ST-ZIP				3,4, (ITY-S	T-ZIP	<u>. </u>						
TITLE			☐ DELETE	4.1 T	ITLE					hange	☐ Addition		
NAME				4,21	IAME								
STREET ADDRESS				4.3 S	TREET	ADORES	s						
CITY-ST-ZIP				4.4 C	ITY-S	T-ZIP							
TITLE			☐ DELETE	5.1 T						hange	☐ Addition		
NAME				5.2 N	AME				ů.				
STREET ADDRESS				5.3 S	TREET	ADDRES	s				•		
CITY-ST-ZIP				5.4 C	ITY-S	T-ZiP							
TITLE			☐ DELETE	6.1 T	TLE		 			hange	Addition		
NAMÉ				6.2 N	AME								
STREET ADDRESS				6.3 S	TREET	ADDRES	s	٠					

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP