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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherir e Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 27, 1999 8:00 am Secretary of State 04-27-1999 90090 017 ***150.00

DOCU 1. Corporation	MENT # 7 98000020551 "	,		
Bonit	a Building Group, Inc.			
Principal Plac	e of Business Mailing Address	· 		
366 U	Olde Cottage In.			
3001	orde corrage 211.		DO NOT WRITE IN TH	IS SPACE
Bonis	a Springs, FC 34134		3. Date Incorporated or Qualifed	
	Jan		03/02/1998	
	Place of Business 2a. Mailing Address		4. FEI Nurr ber	Applied For
21 25 16		nnyroyor U.		Not Applicable
Suite, Apt			5. Certifcate of Status Desired	\$8.75 Additional Fee Reguired
City & Sta	27 City & State		S. Stanting Company Francisco	
23 Bonis		prings, FC	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Countr/ ZIp	Country	8. This corporation owes the current year I	
24 3413	34 25 USA 29 34134	30 USA	Persona Property Tax.	∐ Yes 【 ≵1 No _
	9. Name and Address of Current Fegistered Agent		10. Name and Address of New Registere	d Agent
Heiko	Weinkauff	81 Name (/	rsula Weinkauff	
	1.		ess (P.O. Box Number is Not Acceptable)	
25161	Pennyroyal Dr.	25/61	Pennyroyal Dr.	
		83		
50niv	a Springs, FC 34134	84 City	Va Solings F	85 Zip Code
	to the provisions of Sections 607.0502 and 607.1508, Florida Statute	s the above-named corre		
office or a	registered agent, or both, in the State of Florida. Such change was at	thorized by the corporatio	n's board of directors. I hereby accept the appe	ntment as registered
-	am familiar with, and accept the obligations of, Section 607.0505, Flor	Isula Wa	inhan A	19-99
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature required	when reinstating) DATE	7 - 77
12.	CFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	Director DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Heiko Weinkauff,	1.2 NAME		
STREET ADDRESS	25161 Penryroyal Dr.	1.3 STREET ADDRESS		}
CITY-ST-ZIP	Bonida Spribs, FC 34134	1.4 CITY-ST-ZIP	12.	Change M Addition
TITLE	O . DEFEIE	2.1 TITLE	irector	Change Addition
NAME		22 NAME 23 STREET ADDRESS	sula Weinkau H 5161 Pennyroyal Dr.	
STREET ADDRESS			oniva Springs, FC 3	4114
TITLE	☐ DELETE	31 TITLE	31711 J. 1.2 2	☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRÉS ;		3.3 STREET ADDRESS	- to the second	ļ
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRES ;		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		Change Addition
TITLE	DELETE	5.1 TITLE 5.2 NAME		
NAME		53 STREET ADDRESS		
STREET ADDRES;		5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	DELETE	61 TITLE		☐ Change ☐ Addition
NAME	_	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		

14. 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)