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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # DO

1. Corporation	Name # P98000 SON PROJECTS, INC.	J027401		
Principal Place	of Business	Mailing Address		T 924/100 JN 1918/ JUST BOOKS DOKT DOSTE SALER FINIT SOUTH BOOK BOOK JIED SEDT
8026 COTE COURT ORLANDO FL 32836		8026 COTÉ COURT ORLANDO FL 32836		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed 03/23/1998
2. Principal Pla	ace of Business	2a. Mailing Address		4, FEI Number Applied For
21		26		59-3506139 Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired
22		City & State		
City & State		— ·		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country		Country	This corporation owes the current year Intangible
24	25	29 30	¬ ·	Personal Property Tax. Yes You
24	9. Name and Address of Curre		<u> </u>	10. Name and Address of New Registered Agent
			81 Name	
PHILLIPS, R. PATRICK ESQUIRE 200 N. THORNTON AVE. ORLANDO FL 32801		•	82 Street	Address (P.O. Box Number is Not Acceptable)
			83	
			84 City	FL 85 Zip Code
				
office or re- agent. I am SIGNATURE	to the provisions of Sections 607.050 gistered agent, or both, in the State of familiar with, and accept the obligations of the state of familiar with and accept the obligations.	e of Florida. Such change was auth ations of, Section 607.0505, Florida	lorized by the corbo	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered . guired when reinstating) DATE
office or re- agent. I am	gistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered age	e of Florida. Such change was auth ations of, Section 607.0505, Florida	a Statutes.	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered equired when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 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 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

Change

Addition