ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000043676 1

SUTTON BROKERAGE COMPANY

FILED Jul 12, 1999 8:00 am Secretary of State

07-12-1999 90002 029 ***550.00



incipal Place of Business Mailing Address						,
5 SAND LAKE DR #222 7345 SAND LAKE DR #222			22			
ANDO FL 32819 0			RLANDO FL 32819			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						05/12/1998
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
•		26	•			59-351-1939 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired 38.75 Additional
		27				5. Certificate of Status Desired Fee Required
City & State			City & State			6. Election Campaign Financing \$5.00 May Be
28					Trust Fund Contribution Added to Fees	
Zip Country			Zip Country		intry	8. This corporation owes the current year
	25	29	,	30	,	Intangible Personal Property. Yes No
	9. Name and Address of Currer	nt Regis	stered Agent			10. Name and Address of New Registered Agent
ei III	ON DONALD A				81 Name	DOMED SUTION TON' I
SUTTON, DONALD A 7345 SAND LAKE DR., #222					82 Street Addr	ress (P.O. Box Number is Not-Acceptable)
7343 SAND LANE DR., #222 ORLANDO FL 32819					160	O APPLE HEE CIR
Unu	MADO LE 25918				83	
			_		84 City	85 Zjp Code
		0_	Λα.		1 10	R LAWO FL 33819
- Pursuant	to the provisions of sections/607.050	2 and 6	07. 508, Florida Statut	tes, the ab	ove-named corporation	eration submits this statement for the purpose of changing its registered
Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, and accept the appointment as registered agent. I am familiar with, and accept the obligations of section 807.0505, Florida Statutes.						
GNATURE) trall N	لمما				7/6/99
	Signature, typed or printed name of rigistered age				ered Agent signature requ	
·	OFFICERS AN	ND DIRE		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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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.

IGNATURE: