FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT #

1. Corporation Name

P98000058463 \

SUDVENUE VEN INC

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90252 005 ***150.00

SURVEYHEAVEN, INC.									*	
					,					
Principal Place of Business Mailing Address						·				
•						DO NO	DO NOT WRITE IN THIS SPACE			
							Date Incorporated or Qualifed			
D. Deleviral Class of Pusings						7/1/98				
22. Principal Place of Business 21 4843 Sweetmeadow Circle 26 4140 Central				C		4. FEI Number		<u> </u>	oplied For	
Suite, Apt. #, etc. Suite, Apt. #				Saras	ota Pr	cw. 65-0846908			ot Applicable Additional	
L			Apt. 1227			5. Certifcate of Status Des	ired 🗀		equired	
City & Sta		City & Stat	City & State			6. Election Campaign Fina	6. Election Campaign Financing \$5.00 May Be			
23 Saraso	 		The state of the s			Trust Fund Contribution	Trust Fund Contribution Added to Fees			
Zip Country . Zip			_	Country		8. This corporation owes the	e current year Ir		RT	
24 34238	9. Name and Address of Current	29 34238	3	<u>이 고</u>	SA	Personal Property Tax. 10. Name and Address of	Now Posistores	∐ Yes	⊠ No	
	'	registered Agein	<u>. </u>	81	Name	to. Name and Address of	New Registered	Agent		
David I	M Silberstoin Fac			-						
David M. Silberstein, Esq. c/o Kirk Pinkerton				82	Street Ad	ddress (P.O. Box Number is Not A	cceptable)			
720 South Orange Avenue			•	83						
Sarasota, Florida 34236			84	City			85 Zip (Codo		
					1		FL	_		
11. Pursuant office or r	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of	and 607.1508, Flo Florida. Such cha	rida Statutes, nge was auth	, the above	e-named co	orporation submits this statement f	or the purpose of	changing its	registered	
agent. I a	m familiar with, and accept the obligatio	ns of, Section 607	.0505, Florida	a Statutes		and to board or directors. Thereby	describe appo	memorit as reg	giotored	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title of applicable	/NOTE: De		4t	uired when reinstating)				
12.	OFFICERS AND		(NOTE, Re	13,	t signature requ	ADDITIONS/CHANGES T	O OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	DPST		DELETE	1.1 TITLE				☐ Change	Addition	
NAME	Eric Moody			1.2 NAME						
STREET ADDRESS	DDRESS 4140 Central Sarasota Parkway, #1227			1.3 STREET	ADDRESS					
CITY-ST-ZIP	Sarasota, Florida 34238			1.4 CITY-ST	-ZiP		,			
TITLE	☐ DELETE			2.1 TITLE				☐ Change	Addition	
NAME	·			2.2 NAME						
STREET ADDRESS				2.3 STREET						
CITY-ST-ZIP TITLE	☐ DELETE			2. 4 CITY-ST-ZIP 3.1 TITLE				☐ Change	Addition	
NAME				3.2 NAME				☐ Change	Addition	
STREET ADDRESS	RESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP				3.4. CITY-SI						
TITLE			ELETÉ	4.1 TITLE				☐ Change	Addition.	
NAME				4. 2 NAME					İ	
STREET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-ZIP		-		4.4 CITY-ST	-ZIP					
TITLE			ELETE	5.1 TITLE				☐ Change	☐ Addition	
NAME				5.2 NAME					1	
STREET ADDRESS			l	5.3 STREET						
CITY-ST-∓iP TITLE		<u> </u>	ELETE	5.4 CITY-ST- 6.1 TITLE	- ZIP		<u> </u>		Addition :	
MAME		نے د		62 NAME				☐ Change	Addition	
STREET ADDRESS				63 STREET	ADDRESS				į	
STN-ST-ZIP				64 CITY-ST-	Ì					
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4. 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 snall 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 Slock 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mooth Eric Moody

4/28/99

(941) 918-1531