07271999-90002-017-$150.00-$150.00

AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

FILED
Jul 27, 1999 8:00 am
Secretary of State
07-27-1999 90002 017 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000088645

1. Corporation Name
SUNWISE SWIMWEAR, INC.

Principal Place of Business	Mailing Address
3641 W. HILLSBORO BLVD #F102 COCONUT CREEK FL 33073	3641 W. HILLSBORO BLVD #F102 COCONUT CREEK FL 33073

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/16/1998

2. Principal Place of Business	2a. Mailing Address
21 265 GOOLSBY BLVD	26 265 GOOLSBY BLVD
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 DEERFIELD BEACH, FL	28 DEERFIELD BEACH, FL
24 Zip 33442 / 25 Country USA	29 Zip 33442 / 30 Country USA

4. FEI Number 650875064 ~~65-0870664~~ ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
REDMAN, VESESSA 5851 HOLMBERG ROAD UNIT 2112 PARKLAND FL 33067	81 Name: REDMAN VENESSA 82 Street Address (P.O. Box Number Is Not Acceptable): 3641 W. HILLSBORO BLVD #F102 83 84 City: COCONUT CREEK FL 85 Zip Code: 33073

11. 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	REDMAN, VENESSA		1.2 NAME	REDMAN, VENESSA	
STREET ADDRESS	5851 HOLMBERG ROAD #2112		1.3 STREET ADDRESS	3641 W. HILLSBORO BLVD #F102	
CITY-ST-ZIP	PARKLAND FL 33067		1.4 CITY-ST-ZIP	COCONUT CREEK FL 33073	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MERWIN, DEBORA		2.2 NAME		
STREET ADDRESS	588 DEER CREEK RUN		2.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (5/99)

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.

SIGNATURE: SIGNATURE REQUIRED REDMAN 7/7/99 954-427595
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #