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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

STUNE	HOUSE ENGINEERING SE	HVICES CORP.				
Principal Plac	e of Business	Mailing Address	***	· -		
2329 LONGBOAT DRIVE 2329 LONGBOAT DRIVE						
NAPLES FL 34104 NAPLES FL 33942						
US US					DO NOT WRITE IN THIS SPACE	
J					3. Date incorporated or Qualified	
					01/01/1991	
L		2a, Mailing Address	~		4. FEI Number	Applied For
21 SAME		26 SAME		65-0235854	Not Applicable	
Suite, Apt. #, etc.		k1	Suite, Apt. #, etc. I		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State			
 		<u>}</u> ¬ *	-¬ '		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28 Z _{(D}	Coun	Irv		
24	25	29	30	.,	This corporation owes or has paid the cu Personal Property Tax due June 30.	Irrent year intangible Yes XNo
	9. Name and Address of Curre				10. Name and Address of New Registered	
				Name		
HAUSTEIN, NORMAN 2329 LONGBOAT DRIVE			ļ.,	50 00000	(D.O. D. M (- i. M. A A-1)	
	PLES FL 34104		1	Street Addi	ress (P.O. Box Number is Net Acceptable)	
ראוו	AFLEO FE 34104		ļī.	13		
			L			
			1	City	FL	85 Zip Code
office or r agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State of familiar with, and accept the oblig	e of Florida. Such change	was authorized	by the cornerat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	of changing its registered
SIGNATURE	Signature, typod or printed name of registered ag	jont and title if applicable	(NOTE: Registered	Agent signature requir	red when reinstating) DATE	
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PST	DELET	TE 1.1 30L	F		Change Addition
NAME	HAUSTEIN, NORMAN		1.2 NAN	le l		
STREET ADDRESS	2329 LONGBOAT DR.		1.3 STR	EET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 C(T)	'-ST-ZIP		
TITLE	☐ DELETE 2.1		TE 2.1 1116	F T		Change Addition
NAME	2		2.2 NAN	IE		
STREET ADDRESS			2.3 STR	ET ADORESS		
CITY-ST-ZIP			2. 4 GIT	Y - S1 - ZIP		
TITLE		DELET	TE 3.1 TITL	E		Change Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STR	ET ADDRESS		
CITY-ST-ZIP			3.4. CIT	/-ST-ZIP		
TITLE		DELET	TE 4.1 THT L	E		☐ Change ☐ Addition
NAME			: 4. 2 NA!	AE		
STREET ADDRESS			4.3 STR	ET ADDRESS		
CITY-ST-ZIP				- ST - Z(P		
TITLE		☐ DELET	TE : 5.1 TITL	F		☐ Change ☐ Addition
NAME			5.2 NAN	IE		
STREET ADDRESS			5 3 STHI	ET ADDRESS		
CITY - ST - ZIF				- S1 - ZIP		
TITLE		DELET	TÉ 61 TITL			Change Addition
NAME			6.2 NAM	t		
STREET ADDRESS			6.3 STR	ELI ADDRESS		

14. Thereby 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.

FILED

Jan 20 1998 8:00am

Secretary of State