SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S92613

(6)

SUNCOAST PROPERTY SALES, INC.

FILED Aug 11 1997 8:00am Secretary of State

37 180TH AVENU REDINGTON SHO 2. Principal Plac 21 7828 Suite, Apt. #,	ORES FL 33708-1157 OF BUSINGSS OF TEEP. NORTH	Mailing Address 37 190TH AVENUE REDINGTON SHORES F 28 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	FL 33708-1157 TEAR. WEIT	11/07/1991	
23 33.70	8 25 PINEUAS 9, Name and Address of Current	29 33708	5BURG, FL 30 PINEUAS	6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has paid th Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
401 S SUITE INDIAL	N ROCKS BEACH FL 34635 the provisions of Sections 607.0502	f Florida. Such change wa	83 84 City lutes, the above-named co	dress (P.O. Box Number is Not Acceptable) rporation submits this statement for the purporation's board of directors. I hereby accept the	FL 85 Zip Code se of changing its registered e appointment as registered
	gnature, typed or printed name of registered agent		IO1E Registered Agent signature req	uited when roinstating) D/	ATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST LOWE, CHARLES F 37 180TH AVE. REDINGTON SHORES FL	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP	ADDITIONS/CHANGES TO OFFICERS	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST LOWE, CHARLES F 37 180TH AVE.	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST LOWE, CHARLES F 37 180TH AVE.	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	Change Addition Change Addition Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PVST LOWE, CHARLES F 37 180TH AVE.	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PVST LOWE, CHARLES F 37 180TH AVE.	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ADDITIONS/CHANGES TO OFFICERS	Change Addition Change Addition Change Addition

4. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this arinual report or supplemental annual report is true and accurate and that my signalure 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 trusted 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.

CIONATURE.

DIANTI DE LA TRESTA

Ang 6 1997 (913) 590-797