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PROFIT CORPORATION ANNUAL REPORT

1999



Mailing Address

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S96931**

1. Corporation Name

SNO 2 GO, INC.

Principal Place of Business

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90086 029 ***150.00



						DO NOT WRITE IN THIS SPACE				
330000000000000000000000000000000000000			ļ-			3. Date Incorporated or Qualifed				
						11/25/1991			ļ	
Place of Business	. 2a. Mailing Address	- .		· .	4.			A	pplied For	
21		26				59-3095330		N	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					П		Additional	
22		27			5.	Certificate of Status Desired		Fee R	equired	
City & State		City & State			6.	Election Campaign Financing			May Be	
Zip Country					Trust Fund Contribution Added to Fees					
Country	Country Zip Cou									
25	29	<u> </u>			Personal Property Tax. Yes No					
24 25 29 30 9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
OCTING TOUN			81	Name						
			82	82 Street Address (P.O. Box Number is Not Acceptable)						
SUITE 4										
			83						Í	
JOWAN PL 340//			84	City				85 Zip	Code	
				-	_			- ` `		
to the provisions of Sections 607.050	2 and 607.1508, Florida St	atutes, the	above	named co	rporation	n submits this statement for the	purpose o	f changing its	s registered	
registered agent, or both, in the State am familiar with, and accept the obliga	เบา คเอกตล. อนตก change wa ations of, Section 607.0505,	Florida Sta	eu by atutes.	ne corpora	auon S DC	sard of directors, a necessy acce	hr min ahhn	munoni as II	-gracereu	
									Į	
Signature, typed or printed name of registered age	199			signature requ			DATE			
12. OFFICERS AND DIRECTORS TITLE DPT DELETE						ADDITIONS/CHANGES.TO OF	FICERS A			
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	☐ DELETE				•			∐ Change	Addition	
KERSTING, JOHN		1.2	NAME							
150 BURBANK RD., #4		1.3	STREET	ADDRESS					}	
OLDSMAR FL			CITY-S1	-ZIP						
S	A DELETE	2.1	TITLE						Addition	
		2.2	NAME							
	# , * # . .	2.3	STREET	ADDRESS		-•			1	
OLDSMAR FL			CITY-S	r-ZIP			_			
D DELETE 3.1 T			TITLE					Change	☐ Addition	
SPAUNAUGLE, MARVIN		3.2	NAME						ļ	
150 BURBANK RD., #4		3.3	STREET	ADDRESS					}	
			CITY-S	r-ZIP						
	☐ DELETE	4.1	TITLE		_			Change	Addition	
1		4. 2	NAME							
		4.3	STREET	ADDRESS					ł	
		4.4	CITY-S1	-ZIP			_			
	☐ DELETE	5.1	TITLE			•		Change	☐ Addition	
			NAME							
		3.2								
			STREET	ADDRESS						
	<u></u>	5.3	STREET CITY-ST	- 1						
Smr.c.s. 44 Sec.	☐ DELETE	5.3 5.4		- 1			_	☐ Change	☐ Addition	
Modern of the transfer of the	☐ DELETE	5.3 5.4 6.1	CITY-S1	- 1			_	☐ Change	☐ Addition	
POLITICAL STREET OF THE STREET	☐ DELETE	5.3 5.4 6.1 6.2	CITY-ST TITLE NAME	- 1				☐ Change	☐ Addition	
	Country 25 9. Name and Address of Current STING, JOHN BURBANK ROAD TE 4 SMAR FL 34677 to the provisions of Sections 607.050 registered agent, or both, in the State Immiliar with, and accept the obligation SIgnature, typed or printed name of registered age OFFICERS AND DPT KERSTING, JOHN 150 BURBANK RD., #4 OLDSMAR FL S CAMPBELL, VICKIE A. 150 BURBANK RD., #4 OLDSMAR FL D SPAUNAUGLE, MARVIN 150 BURBANK RD., #4	SUITE 4 OLDSMAR FL 34677 Place of Business 2a. Mailing Address 2b. #, etc. Suite, Apt. #, etc. City & State 28 Country Zip 25 29 9. Name and Address of Current Registered Agent STING, JOHN BURBANK ROAD TE 4 SMAR FL 34677 to the provisions of Sections 607.0502 and 607.1508, Florida Stegistered agent, or both, in the State of Florida. Such change with familiar with, and accept the obligations of, Section 607.0505, Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS DPT KERSTING, JOHN 150 BURBANK RD., #4 OLDSMAR FL S CAMPBELL, VICKIE A. 150 BURBANK RD., #4 OLDSMAR FL D SPAUNAUGLE, MARVIN 150 BURBANK RD., #4 OLDSMAR FL D DELETE SPAUNAUGLE, MARVIN 150 BURBANK RD., #4 OLDSMAR FL	Place of Business 2a. Mailing Address 26 #, etc. Suite, Apt. #, etc. City & State 28 Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip STING, JOHN BURBANK ROAD TE 4 SMAR FL 34677 To the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the egistered agent, or both, in the State of Florida, Such change was authorize m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the egistered agent, or both, in the State of Florida, Such change was authorize m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the egistered agent and the if applicable. OFFICERS AND DIRECTORS DPT KERSTING, JOHN 150 BURBANK RD., #4 OLDSMAR FL D DELETE 1.1 SPAUNAUGLE, MARVIN 150 BURBANK RD., #4 OLDSMAR FL D DELETE 4.1 D DELETE 4.2 4.3 4.4 DELETE 5.1	Suite 4 OLDSMAR FL 34677 Place of Business 2a. Mailing Address 2b. #, etc. Suite, Apt. #, etc. 27 Country Zip Country Zip Country Zip Country 29 30 9. Name and Address of Current Registered Agent STING, JOHN BURBANK ROAD Et 4 SMAR FL 34677 84 SMAR FL 34677 84 SMAR FL 34677 Burbank Road To the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above registered agent, or both, in the State of Florida. Such change was authorized by im familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS DPT KERSTING, JOHN 13. STREET OLDSMAR FL S AUDELETE 1.1 TITLE 2.1 TITLE S CAMPBELL, VICKIE A. 150 BURBANK RD., #4 OLDSMAR FL D DELETE SPAUNAUGLE, MARVIN 150 BURBANK RD., #4 OLDSMAR FL D DELETE 3.1 TITLE SPAUNAUGLE, MARVIN 13.3 STREET AUTY-ST D DELETE 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 4.4 CITY-ST	SUITE 4 OLDSMAR FL 34677 Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 28 Country 29 30 9. Name and Address of Current Registered Agent STING, JOHN BURBANK ROAD 15 Street Act B3 Street Act B3 City Street Act B3 City Country 25 Street Act B3 City Country 26 Part Address of Current Registered Agent STING, JOHN BURBANK ROAD TE 4 SMAR FL 34677 B4 City To the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named or egistered agent, or both, in the State of Florida. Such change was authorized by the corpora fem familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, hyped or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. DPT KERSTING, JOHN 150 BURBANK RD., #4 OLDSMAR FL CAMPBELL, VICKIE A. 150 BURBANK RD., #4 OLDSMAR FL D D DELETE 1.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 1.4 CITY-ST-ZIP D DELETE 3.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP D DELETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP D DELETE 5.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP D DELETE 5.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP D DELETE 5.1 TITLE 5.1 TIT	SUITE 4 OLDSMAR FL 34677 Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 2b. Suite, Apt. #, etc. 27 2c. Country 25 29 30 9. Name and Address of Current Registered Agent STING, JOHN BURBANK ROAD E 4 SMAR FL 34677 84 City 10 to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation egistered agent, or both, in the State of Florida. Such change was authorized by the corporation's burn familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. DPT KERSTING, JOHN 150 BURBANK RD., #4 OLDSMAR FL CAMPBELL, VICKIE A. 150 BURBANK RD., #4 OLDSMAR FL D DELETE 1.1 ITILE 1.2 NAME 1.3 STREET ADDRESS 1.3 LCTY- ST- ZIP 2.3 STREET ADDRESS 3.3 STREET ADDRESS 4.4 CITY- ST- ZIP D DELETE 3.1 TITLE 4.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 4.1 ITITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP 5.5 ITITLE 5.5 ITI	SUITE 4 OLDSMAR FL 34677 OLDS	SUITE 4 OLDSMAR FL 34677 OLDSMAR FL 346775.72P OLDSMAR FL 346775.72P	SUTE 4 OLDSMAR FL 34677 Substance Sub	

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, with all other like empowered.

SIGNATURE: