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

(5)

DOCUMENT #

FILED									
Mar 05 1998 8:00am									
Secretary of State									

SUNDC	JWN SER	WICES, INC.								
Principal Plac	e of Busines	ss	Mailing A	ddress	1.1			- 10011 011011 80110 11081 18106 11111 1061 01611		ANDRE DEDEL EDGL
14207 PIMBERTON DR 14207 PIMBERTON DR										
HUDSON FL 34667 HUDSON FL 34667 US								DO NOT WRITE IN T	THIS SPACE	
			•••					3. Date Incorporated or Qualified		
								01/01/1992		
2. Principal P	lace of Busi	ness	2a. Mailing	a. Mailing Address				4. FEI Number		Applied For
21	# -1-			26				59-3099819		Not Applicable
Suite, Apt.	#, G IC.		· ·	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required
City & Stat	е			City & State				6. Election Campaign Financing		
23			⊢ –	28				Trust Fund Contribution		00 May Be ed to Fees
Zip				Zip Country				8. This corporation owes or has paid the current year Intangible		
24	25		29	30				Personal Property Tax due June 30.	· • • • • • • • • • • • • • • • • • • •	
	9. Name	and Address of Cu	rrent Registered A	gent				10. Name and Address of New Registe	red Agent	
		IRL T., CPA			81	Nar	ne			
7345 JACKSON SPRINGS ROAD					82	Stre	et Addre	ss (P.O. Box Number is Not Acceptable)		
	ITE 3 MPA FL 33	204			83					
ואי	MICK FL 33	034				L.,.				
					84	City	'	1	FL 65 Zi	ip Code
11. Pursuant	to the provis	sions of Sections 607.	.0502 and 607.1508	Florida Statutes	the abov	e-nam	ed corpo	pration submits this statement for the purpo	se of changing	its registered
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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE										
12.	Signature, types		AND DIRECTORS	ie (NOTE I	13.	ani signe	inte tedritet	d when reinstating) DA ADDITIONS/CHANGES TO OFFICERS		OBS IN 12
TITLE	Ď	011102,10	7. TO DITEOTORIO	DELE TE	1.1 TITLE		- T	ADDITIONS/CHARGES TO CITIOERS	Change	
NAME	BUTTER	Y, WAYNE B.			1.2 NAME					
STREET ADDRESS				1.3 STREET ADDRESS			ss			
CITY-ST-ZIP	HUDSO.	N FL			1.4 GITY-S	T-ZIP	ł			
TITLE	D			DELETE	2.1 TITLE	•			☐ Change	e Addition
NAME		IY, NANCY A.			2.2 NAME		ļ	.4 •		
STREET ADDRESS		amberton dr			2.3 STREET	ADDRES	SS	•		
CITY-ST-ZIP	HUDSO	N FL			2. 4 CITY-	ST-ZIP				
TITLE				☐ DELE TE	3.1 TITLE				☐ Change	e 🔲 Addition
NAME					3.2 NAME					
STREET ADDRESS					3.3 STREET	ADDRES	S			}
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TITLE				☐ DELE te	4.1 TITLE				Change	e
NAME					4. 2 NAME					J
STREET ADDRESS					4.3 STREET		is			ì
CITY-ST-ZIP				DELETE	4.4 CITY-S	T-ZIP			[] Change	Addition
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NAME STREET ADDRESS					5.2 NAME	*0555				
ſ	·				5.3 STREET		8			1
CITY-ST-ZIP TITLE	-			☐ DELET E	5.4 CITY - S 6.1 TITLE	ı - ZIP	+		Change	Addition
NAME	:				6.2 NAME				change	- Las receitable
STREET ADDRESS					6.3 STREET	AUUDEC				
CITY-ST-ZIP					6.4 CITY - S		2			
OH I OH ZE	11 5 11 1 1				0.4 0117 3	1 617				

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.