

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V06463** (6)

1. Corporation Name
SUNYCON, INC.



Principal Place of Business: **10 NE 3RD ST FT LAUDERDALE FL 33301**
Mailing Address: **10 NE 3RD ST FT LAUDERDALE FL 33301**

3. Date Incorporated or Qualified: **01/13/1992**
3a. Date of Last Report: **02/06/1995**

2. Principal Place of Business: **21 2935 SE 58th Avenue**
2a. Mailing Address: **26 2935 SE 58th Avenue**

4. FEI Number: **65-0303634**
Applied For: Not Applicable

22. Suite, Apt. #, etc.: **27 Suite 4**

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

23. City & State: **28 Ocala, FL**

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

24. Zip: **34471** 25. Country: **USA** 29. Zip: **34471** 30. Country: **USA**

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**GRITTER, GERALD W.
100 NE 3RD AVE
SUITE 1100
FT LAUDERDALE FL 33301-4997**

10. Name and Address of New Registered Agent
81 Name: **Bettina Lambrechts**
82 Street Address (P.O. Box Number is Not Acceptable): **500 East Broward Boulevard**
83: **Suite 1160**
84 City: **Fort Lauderdale** FL 85 Zip Code: **33301**

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 607.1505, Florida Statutes.

SIGNATURE: *S. Lambrechts* DATE: **4-19-96**

12. OFFICERS AND DIRECTORS		DELETED
TITLE	P	<input type="checkbox"/>
NAME	KREYER, NORBERT	
STREET ADDRESS	10 N.E. THIRD STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	S	<input type="checkbox"/>
NAME	POPOW, EUGENE G	
STREET ADDRESS	10 N.E. THIRD STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	T	<input type="checkbox"/>
NAME	MUELLER, HENRIK	
STREET ADDRESS	10 N.W. THIRD STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	P/S/T	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	Rainer D. Funk		
1.3 STREET ADDRESS	2935 SE 58th Avenue		
1.4 CITY-ST-ZIP	Ocala, FL 34471		
2.1 TITLE	D	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2 NAME	Henrik Mueller		
2.3 STREET ADDRESS	2935 SE 58th Avenue		
2.4 CITY-ST-ZIP	Ocala, FL 34471		
3.1 TITLE	D	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.2 NAME	Margot Mueller		
3.3 STREET ADDRESS	2935 SE 58th Avenue		
3.4 CITY-ST-ZIP	Ocala, FL 34471		
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Rainer D. Funk* DATE: **APR 16 1996** Daytime Phone #: **352-624-7352**

CR2E034 (12/95)