2007 FOR PROFIT CORPORATION ANNUAL REPORT.

DOCUMENT # 578702

1. Entity Name SUNBURST TRAVEL, INC.



FILED Jan 19, 2007 08:00 AM Secretary of State

Principal Place of Business

9131 TAFT STREET PEMBROKE PINES, FL 33024 Mailing Address

9131 TAFT STREET PEMBROKE PINES, FL 33024



DO NOT WRITE IN THIS SPACE

01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1843031

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GEWIRTZ, NORMAN 12954 NW 18TH MANOR PEMBROKE PINES, FL 33028

SIGNATURE:

DO NOT WRITE IN THIS SPACE

me obligations of registered agent.			
SIGNATURE_	Signature, typed or printed name of registered agent and title # applicable. (NOTE: Registered	Agent signature required when remstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007. Fee will be \$550.00 OFFICERS AND DIRECTORS 9. Election Campaign Financing \$5.00 May Be Trust. Fund Contribution			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GEWIRTZ, NORMAN 12954 NW 18TH MANOR PEMBROKE PINES, FL		LINDONOFOR FFO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS GEWIRTZ, SYLVIA 12954 NW 18TH MANOR PEMBROKE PINES, FL		U00000592453 01/19/07-80063-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept