

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 578702

Entity Name: SUNBURST TRAVEL, INC.

FILED  
Jan 08, 2009  
Secretary of State

**Current Principal Place of Business:**

12954 N.W. 18TH MANOR  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

**Current Mailing Address:**

1295 N.W. 18TH MANOR  
PEMBROKE PINES, FL 33028

**New Mailing Address:**

12954 N.W. 18TH MANOR  
PEMBROKE PINES, FL 33028

FEI Number: 59-1843031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GEWIRTZ, NORMAN,  
Address: 12954 NW 18TH MANOR  
City-St-Zip: PEMBROKE PINES, FL

Title: DVS ( ) Delete  
Name: GEWIRTZ, SYLVIA,  
Address: 12954 NW 18TH MANOR  
City-St-Zip: PEMBROKE PINES, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GEWIRTZ, NORMAN,  
Address: 12954 NW 18TH MANOR  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DVS (X) Change ( ) Addition  
Name: GEWIRTZ, SYLVIA,  
Address: 12954 NW 18TH MANOR  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMAN GEWIRTZ

PD

01/08/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date