FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

04-28-2002 90781 048 **150.00

FILED

02 MAY -3 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000073379

1. Entity Name

SUNSET REALTY & INVESTMENTS CORP.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
10300 Sunset Drive	10300 Sunset Drive
Suite, Apt. #, etc.: 140	Suite, Apt. #, etc.: 140
City & State: Miami, FL	City & State: Miami, FL
Zip: 33173 Country: US	Zip: 33173 Country: US

4. FEI Number: Pending 65-0908605 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Mario de las Cuevas

Street Address (P.O. Box Number is Not Acceptable): 10300 Sunset Drive, Suite 140

City: Miami **FL** Zip Code: 33173

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.

SIGNATURE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD- DE LAS CUEVAS, MARIO 10300 Sunset Drive, Suite 140 Miami, FL 33173	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/01)

13. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/12/02 305-596-1606
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #