

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90714 037 ***550.00

000153 AV

DOCUMENT # P01000114907

1. Entity Name

SUNSHINE MAINTENANCE OF COLLIER COUNTY, INC.

Principal Place of Business

10860 SW 138 ST.
 MIAMI FL 33176

Mailing Address

10860 SW 138 ST.
 MIAMI FL 33176

BUI21010

2. Principal Place of Business

994 NORTH BARFIELD DRIVE

3. Mailing Address

994 NORTH BARFIELD DRIVE

Suite, Apt. #, etc.

UNIT 5

Suite, Apt. #, etc.

UNIT 5

City & State

MARCO ISLAND FL

City & State

MARCO ISLAND FL

Zip

34145

Country

Zip

34145

Country

4. FEI Number

651157133

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

ANCHEL, EDWARD
 10860 SW 138 ST.
 MIAMI FL 33176

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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: D
 NAME: DUNN, ROBERT
 STREET ADDRESS: 10860 SW 138 ST.
 CITY-ST-ZIP: MIAMI FL 33176 Delete

TITLE: D
 NAME: HABER, NICHOLAS
 STREET ADDRESS: 10860 SW 138 ST.
 CITY-ST-ZIP: MIAMI FL 33176 Delete

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: D
 NAME: ROBERT DUNN
 STREET ADDRESS: 1166 BREAKWATER CT
 CITY-ST-ZIP: MARCO ISLAND, FL 34145 Change Addition

TITLE: D
 NAME: NICHOLAS HABER
 STREET ADDRESS: 120 GREENVIEW STREET
 CITY-ST-ZIP: MARCO ISLAND, FL 34145 Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/02 941-825-4672
 Date Daytime Phone #

CR2E034 (9/01)