## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 18, 2005 08:00 AM **DOCUMENT # P02000056175 Secretary of State** 1. Entity Name SUNBURST ENTERPRISES OF SOUTH FLORIDA, INC. Mailing Address Principal Place of Business 2220 SOUTHEAST 14TH STREET 2220 SOUTHEAST 14TH STREET POMPANO BEACH, FL 33062 POMPANO BEACH, FL 33062 01072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0446097 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent WILLIAM, LONG G DO NOT WRITE 2220 SE 14TH ST POMPANO, FL 33062 IN THIS SPACE \$. 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 the obligations of registered agent. (NOTE: Registered Agent signature required when renatating) DATE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSD TITLE SCHAAF, GERALD NAME STREET ADDRESS 2220 SOUTHEAST 14TH STREET UNNNNN183298 01/19/05-80055-021 150.00 POMPANO BEACH, FL 33062 CITY-ST-ZIP TITLE LONG, WILLIAM 2220 SOUTHEAST 14TH STREET STREET ADDRESS CITY-ST-ZP POMPANO BEACH, FL 33082 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS DITY-ST-ZIP

SIGNATURE: //

13-05