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FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90026 037 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000081778

1. Corporation Name

SUN INTERNATIONAL RESORTS, INC.



Principal Place of Business

1415 E. SUNRISE BLVD.
FORT LAUDERDALE FL 33304
US

Mailing Address

1415 E. SUNRISE BOULEVARD
FT LAUDERDALE FL 33324
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/22/1993

4. FEI Number

65-0483525

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE CO.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	ALLISON, JOHN	
STREET ADDRESS	1415 E. SUNRISE BLVD.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	
TITLE	VT	☐ DELETE
NAME	CLIFFORD, WILLIAM	
STREET ADDRESS	1415 E. SUNRISE BLVD.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	
TITLE	VD	☐ DELETE
NAME	KARAWAN, HOWARD C.	
STREET ADDRESS	1415 E. SUNRISE BLVD.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	
TITLE	VS	☒ DELETE
NAME	MILLER, MANDY E	
STREET ADDRESS	1415 E. SUNRISE BLVD.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33304	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	SR. V, S
4.3 STREET ADDRESS	MURTHA WILLIAM C.
4.4 CITY-ST-ZIP	1133 BOARDWALK ATLANTIC CITY, NJ 08401
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN. 6, 1999 954.713.2500

Date

Daytime Phone #

CR2E034 (11/98)