


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 24 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # P96000068501 (1)
 1. Corporation Name
SUNSTATE SERVICE SYSTEMS, INC.



Principal Place of Business 4631 NW 31ST AVE #255 FT. LAUDERDALE FL 33309	Mailing Address 4631 NW 31ST AVE #255 FT. LAUDERDALE FL 33309
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3470 SW 15th St Suite, Apt. #, etc. 22 City & State 23 Deerfield Beach, FL Zip 24 33340 Country 25 Broward	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
---	--

3. Date Incorporated or Qualified 08/16/1996	4. FEI Number 65-0782794 APPLIED FOR	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
BERMAN, PHILIP M ESQ
 2424 N.E. 22ND STREET
 POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent
81 Name Kendra Bonga
82 Street Address (P.O. Box Number is Not Acceptable) 3470 SW 15th St
83
84 City Deerfield Beach
85 State FL
86 Zip Code 33340

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		DELETED
TITLE	P	<input type="checkbox"/>
NAME	LAURENCE, VIVIAN C	
STREET ADDRESS	8808 ROSALIE CT	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE	V	<input type="checkbox"/>
NAME	BONGA, KENDRA	
STREET ADDRESS	4015 SW 15TH STREET., D-211	
CITY-ST-ZIP	POMPANO BEACH FL 33089	
TITLE	ST	<input type="checkbox"/>
NAME	ESTRIPEAUT, MARIANELA	
STREET ADDRESS	10005 GROVE LN	
CITY-ST-ZIP	COOPER CITY FL 33328	
TITLE	VP	<input type="checkbox"/>
NAME	Biancalana, Louis	
STREET ADDRESS	701 Brickell Key Blvd, Ste 2503	
CITY-ST-ZIP	Miami, FL 33131	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS	3326 NWS 69th St		
2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33309		
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	VP	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.2 NAME	Biancalana, Louis		
4.3 STREET ADDRESS	701 Brickell Key Blvd, Ste 2503		
4.4 CITY-ST-ZIP	Miami, FL 33131		
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
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.

SIGNATURE: *Kendra Bonga* (9/15/98) 954-984-8213

CR2E034 (5/98)