

**FILED**  
**May 17, 1999 8:00 am**  
**Secretary of State**

05-17-1999 90008 044 \*\*\*150.00

**PROFIT CORPORATION ANNUAL REPORT 1999**



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

**DOCUMENT #**

1. Corporation Name  
**Sunstate Service Systems, Inc.**  
**DBA Sun micro of Florida**

Principal Place of Business Mailing Address  
**3470 S.W. 15th St.**  
**Deerfield bch, fl 33442**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**8-16-96**

4. FEI Number **65-0782794** 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 2a. Mailing Address

21 **3470 S.W. 15th St.** 26 **3470 S.W. 15th St.**

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State **Deerfield bch, fl** 28 City & State **Deerfield bch, fl.**

24 Zip **33442** 25 Country **USA** 29 Zip **33442** 30 Country **USA**

9. Name and Address of Current Registered Agent  
**Kendra Bonga**  
**3326 N.W. 6th St.**  
**Ft. Lauderdale, fl. 33309**

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 Kendra Bonga Kendra Bonga **KENDRA BONGA** 5/25/99  
Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when resigning) DATE

12. President OFFICERS AND DIRECTORS

TITLE  DELETE  
 NAME **NIVIAN C. Lawrence**  
 STREET ADDRESS **8608 Rosalie Ct.**  
 CITY-ST-ZIP **Boynton bch, fl. 33437**

TITLE  DELETE  
 NAME **Kendra Bonga**  
 STREET ADDRESS **3326 N.W. 6th St.**  
 CITY-ST-ZIP **Ft. Lauderdale, fl. 33309**

TITLE  DELETE  
 NAME **MARIAVELLA Estripeant**  
 STREET ADDRESS **10005 Grove Lane**  
 CITY-ST-ZIP **Copper City, fl. 33328**

TITLE  DELETE  
 NAME **Luis BIANCALANA**  
 STREET ADDRESS **701 Brickel Key Blvd, Ste. 2503**  
 CITY-ST-ZIP **Miami, fl. 33131**

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

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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: Kendra Bonga **KENDRA BONGA** V. President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 954 418-0802  
Date Daytime Phone #

CR2E034 (1/98)