

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 377907 (1)

1. Corporation Name

SUNSHINE CITY CORP.



Principal Place of Business

1006 US HWY 27 N.
HAINES CITY FL 33844

Mailing Address

1006 US HWY 27 N.
HAINES CITY FL 33844

3. Date Incorporated or Qualified
03/04/1971

3a. Date of Last Report
04/11/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

47-0537063

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

23

City & State

28

City & State

24

Zip

Country

25

29

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RIVAS, RONALD
1006 US HWY 27 N
HAINES CITY FL 33844

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
RIVAS, RONALD
STREET ADDRESS
506 MONTGOMERY PLACE
CITY-ST-ZIP
WINTER HAVEN FL

TITLE ☐ DELETE

NAME
VS
RIVAS, LINDA S.
STREET ADDRESS
506 MONTGOMERY PLACE
CITY-ST-ZIP
WINTER HAVEN FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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