SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

AMENDED

PROFIT CORPORATION ANNUAL REPORT

1996

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

APPROVED AND FILED
96 AUG 30 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 452814

(7)

1. Corporation Name

SUN-FUN PRODUCTS, INC.

Principal Place of Business	Mailing Address
340 MARION STREET P.O. BOX 3088 DAYTONA BEACH, FL 32118	340 MARION ST. P.O. BOX 3088 DAYTONA BEACH, FL 32118

3. Date Incorporated or Qualified: 05-10-1974
3a. Date of Last Report: 04-26-96
4. FEI Number: 59-1545031 — Applied For / Not Applicable

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip 24 — Country 25

2a. Mailing Address
26
Suite, Apt #, etc
27
City & State
28
Zip 29 — Country 30

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

9. Name and Address of Current Registered Agent

BURKE, PAUL E SR.
731 NORTH GRANDVIEW AVE
DAYTONA BEACH, FL 32118

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 ____ DATE ____

12. OFFICERS AND DIRECTORS

TITLE	TD	[ ] DELETE
NAME	JOHN ELTONHEAD	
STREET ADDRESS	374 TRAFALGA RD.	
CITY-ST-ZIP	PORT ORANGE, FL 32127	
TITLE	PD	[ ] DELETE
NAME	BURKE, PAUL E SR.	
STREET ADDRESS	731 N GRANDVIEW AVE	
CITY-ST-ZIP	~~DAYTONA BCH,FL~~ 32118	
TITLE	D	[ ] DELETE
NAME	CHRISTENSEN, ARTHUR S	
STREET ADDRESS	454 BOUCHELLE DR.	
CITY-ST-ZIP	NEW SMYRNA BCH. FL 32169	
TITLE	ST	[ ] DELETE
NAME	SUSAN YOUNG	
STREET ADDRESS	39 LAUREL OAK CIRCLE	
CITY-ST-ZIP	ORMOND BEACH, FL 32174	
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 — [ ] Change [ ] Addition

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CR2E034 (3/96)

14. I do 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 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: PAUL E BURKE, SR. — Paul E Burke — 8/27/96 (904) 255-1830
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR