2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2001 8:00 am
Secretary of State
04-13-2001 90039 023 ***158.75

DOCUMENT # 598575

1. Entity Name
SUNRISE MARINE TANK COMPANY

Principal Place of Business	Mailing Address
7211 NW 46 ST. MIAMI FL 33166 US	11773 S.W. 34 ST. MIAMI FL 33175

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5715 PINKNEY AVE	382 SUNNYSIDE DR.
Suite, Apt. #, etc. UNIT C	Suite, Apt. #, etc.
City & State SARASOTA FL	City & State VENICE FL
Zip 34233 / Country US	Zip 34293 / Country SARASOTA FL

4. FEI Number 59-1848491 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEREZ, ANTONIO PABLO
11773 S.W. 34 ST.
MIAMI, FL MH FL 33175

7. Name and Address of New Registered Agent

Name: ANTONIO PABLO PEREZ
Street Address (P.O. Box Number is Not Acceptable): 382 SUNNYSIDE DRIVE
City: VENICE FL Zip Code: 34293

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PEREZ, ANTONIO PABLO 11773 S.W. 34TH ST. MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ~~PEREZ~~ ANTONIO PABLO PEREZ 382 SUNNYSIDE DRIVE VENICE FL 34293	☑ Change ☐ Addition
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CR2E034 (10/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO P PEREZ 4-03-01 941 926 8265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #