


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90100 004 ****70.00

DOCUMENT # 712769 1. Entity Name SUNSET CHAPEL, INC.					
Principal Place of Business 9393 SUNSET DRIVE MIAMI, FL 33173			Mailing Address 9393 SUNSET DRIVE MIAMI, FL 33173		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1485685	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent KREIDMAN, JUDITH 11314 SW 154 TERR MIAMI, FL 33157				7. Name and Address of New Registered Agent Name LAING, ANGELLA Street Address (P.O. Box Number is Not Acceptable) 8510 SW 102 AVE City MIAMI FL Zip Code 33173	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE ANGELLA LAING, SECRETARY <small>Signature, typed or printed name of registered agent and title, if applicable.</small>				DATE 1-27-05 <small>NOTE: Registered Agent signature required when reinstating.</small>	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KREIDMAN, JUDITH 11314 SW 154 TERR MIAMI, FL 33157	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAING, ANGELLA 8510 SW 102 AVE MIAMI, FL 33173	Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PEREZ, PEDRO J 10625 SW 130 AVE MIAMI, FL 33186	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WATKINS, FRANCES 7315 SW 132 CT MIAMI, FL 33183	Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR PEREZ, SHEILA 4525 SW 117 AVE MIAMI, FL 33175	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BLANKENSHIP, TERRY 9108 SW 165 PL MIAMI, FL 33196	Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR TEIJEIRO, LUIS 8600 SW 86 AVE MIAMI, FL 33143	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR OLSEN, ERIC G 7134 SW 93 CT MIAMI, FL 33173	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FERNANDEZ, RAFAEL 12100 SW 97 TERR MIAMI, FL 33186	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: ANGELLA LAING <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date 1-27-05 Daytime Phone 305-271-4094	

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