

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A 20951**

1. Entity Name

**Sunny Realty Associates, Ltd.**

FILED

00 APR -7 AM 10:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2. Principal Place of Business

3. Mailing Address

**8731 N 30th Street**

**Same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**APT. A**

City & State

City & State

**Tampa, Florida**

4. FEI Number

**59-2614409**

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

**33604**

**Hillsborough**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**Ghaly, Samira**  
**1348 Summerlin Drive**  
**Clearwater, FL.**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

**\$361,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT #  
NAME **Ghaly, Samira**  
STREET ADDRESS **8701 North Larkhall P**  
CITY-ST-ZIP **Tampa, FL 33603**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME **Ghaly, Bouli's**  
STREET ADDRESS **48-24 59th Street**  
CITY-ST-ZIP **Woodside, N.Y. 11377**

STREET ADDRESS

CITY-ST-ZIP

**500003223245--1**  
**-04/25/00--D1077--004**  
**\*\*\*526.25 \*\*\*526.25**

DOCUMENT #  
NAME **Ghaly, Michel**  
STREET ADDRESS **48-24 59th Street**  
CITY-ST-ZIP **Woodside, N.Y. 11377**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME **Wahba, Emil**  
STREET ADDRESS **141.52 76 Road**  
CITY-ST-ZIP **Flushing, N.Y. 11367**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME **Boulos, Atet**  
STREET ADDRESS **42 Dominic Drive**  
CITY-ST-ZIP **Rockaway, N.J. 07866**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME **Guirguis, Fawzi HD**  
STREET ADDRESS **43 Kensington Avenue**  
CITY-ST-ZIP **Jersey City, N.J. 07304**

STREET ADDRESS

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

**Samira Ghaly**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**3-15-2000**

Date

**(813)989-3725**

Daytime Phone #

CR2E003 (9/99)