

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 28 1997 8:00am
Secretary of State

DOCUMENT # F96000005961 (5)

1. Corporation Name
SUNBURST ENTERPRISES, INC. OF MN.

Principal Place of Business Mailing Address
%HARRIS COOPER- SUNBURST ENTERPRISES, INC.
1107 HAZELTIME BLVD #474
CHASKA MN 55318 %HARRIS COOPER- SUNBURST ENTERPRISES, INC.
1107 HAZELTIME BLVD #474
CHASKA MN 55318-1008



2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 1107 Hazeltine Blvd #475 27 1107 Hazeltine Blvd #475
23 City & State 28 City & State
24 Zip 25 Country 29 Zip 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report
11/14/1996
4. FEI Number Applied For
41-1834663 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
7. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
COOPER, HARRIS
9051 GULFSHORE DR
NAPLES FL 34108
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 reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DCPT ☐ DELETE 11 TITLE ☒ Change ☐ Addition
NAME COOPER, HARRIS 12 NAME
STREET ADDRESS 1107 HAZELTIME BLVD #474 13 STREET ADDRESS 1107 Hazeltine Blvd #475
CITY-ST-ZIP CHASKA MN 55318 14 CITY-ST-ZIP
TITLE DCVS ☐ DELETE 21 TITLE ☒ Change ☐ Addition
NAME COOPER, PATRICE D 22 NAME
STREET ADDRESS 1107 HAZELTIME BLVD #475 23 STREET ADDRESS 1107 Hazeltine Blvd #475
CITY-ST-ZIP CHASKA MN 55318 24 CITY-ST-ZIP
TITLE ☐ DELETE 31 TITLE ☐ Change ☐ Addition
NAME 32 NAME
STREET ADDRESS 33 STREET ADDRESS
CITY-ST-ZIP 34 CITY-ST-ZIP
TITLE ☐ DELETE 41 TITLE ☐ Change ☐ Addition
NAME 42 NAME
STREET ADDRESS 43 STREET ADDRESS
CITY-ST-ZIP 44 CITY-ST-ZIP
TITLE ☐ DELETE 51 TITLE ☐ Change ☐ Addition
NAME 52 NAME
STREET ADDRESS 53 STREET ADDRESS
CITY-ST-ZIP 54 CITY-ST-ZIP
TITLE ☐ DELETE 61 TITLE ☐ Change ☐ Addition
NAME 62 NAME
STREET ADDRESS 63 STREET ADDRESS
CITY-ST-ZIP 64 CITY-ST-ZIP

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 annual report or supplemental annual 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: Harris Cooper Pres 4/22/97

CR2E034 (9/96)