

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

FILED

Apr 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H22140** (8)
1. Corporation Name
SUNLINE SALES CORPORATION

Principal Place of Business 1201 BELVEDERE RD. WEST PALM BEACH FL 33405 US	Mailing Address 1201 BELVEDERE RD. WEST PALM BEACH FL 33405-1009 US
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2. Principal Place of Business 21 9167 SE STAR ISLAND WAY		2a. Mailing Address 26 9167 SE STAR ISLAND WAY		3. Date Incorporated or Qualified 09/18/1984	3a. Date of Last Report 04/25/1996
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-2450486	Applied For <input type="checkbox"/> Not Applicable
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 HOBE SOUND FL.		28 HOBE SOUND FL.		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 33455		25 MARTIN		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
29 33455		30 MARTIN			

9. Name and Address of Current Registered Agent
**HARRIS, JEFFREY
9930 SE MAHOGANY WAY
TEQUESTA FL 33469**

10. Name and Address of New Registered Agent
81 Name JEFFREY HARRIS
82 Street Address (P.O. Box Number is Not Acceptable)
83 9167 S.E. STAR ISLAND WAY
84 HOBE SOUND FL 85 33455

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	PT	11 TITLE	PT
NAME	HARRIS, JEFFREY	12 NAME	JEFFREY HARRIS
STREET ADDRESS	9930 SE MAHOGANY WAY	13 STREET ADDRESS	9167 SE STAR ISLAND WAY
CITY-ST-ZIP	TEQUESTA FL	14 CITY-ST-ZIP	HOBE SOUND FL. 33455
TITLE	VS	21 TITLE	
NAME	BAKER, PERRY	22 NAME	
STREET ADDRESS	203 HONEYSUCKLE LANE	23 STREET ADDRESS	
CITY-ST-ZIP	LONGWOOD FL	24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)