

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H33872** (3)

1. Corporation Name

SUNRISE AUTO AIR, INC.



Principal Place of Business

**7842 NW 44 ST
SUNRISE FL 33351-6206**

Mailing Address

**7842 NW 44 ST
SUNRISE FL 33351-6206**

3. Date Incorporated or Qualified
12/12/1984

3a. Date of Last Report
09/25/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

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4. FEI Number

~~59-2483834~~ 65-0613810

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. 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

**MONZOLINO, JOSEPH
7842 NW 44 ST
SUNRISE FL 33321**

81 Name **STEVEN RUBINO**

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

8940 NW 77th COURT #107

83

84

City **TAMARAC**

FL

85

Zip Code **33321**

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

Steven Rubino

STEVEN RUBINO

4/6/96

Signature, typed or printed name of registered agent and the payor.

(NOTE: Registered Agent signature required when resigning.)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VST** ☒ DELETE
NAME **MONZOLINO, JOSEPH**
STREET ADDRESS **9470 NW 48TH STREET**
CITY-ST-ZIP **SUNRISE FL**

TITLE **P** ☒ DELETE
NAME **MONZOLINO, JOSEPH**
STREET ADDRESS **7842 NW 44TH STREET**
CITY-ST-ZIP **SUNRISE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **P/O** ☒ Change ☐ Addition
12 NAME **STEVEN RUBINO**
13 STREET ADDRESS **8940 NW 77th COURT #107**
14 CITY-ST-ZIP **TAMARAC FL 33321**

21 TITLE **SEC/D** ☒ Change ☐ Addition
22 NAME **ALAN MUSBAUM**
23 STREET ADDRESS **10871 SEA HIBISCUS LANE**
24 CITY-ST-ZIP **TAMARAC FL 33321**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Steven Rubino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
STEVEN RUBINO PRESIDENT

4/6/96

(954) 741-3722

Date

Daytime Phone #

CR2E034 (12/95)