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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

TITLE

NAME STREET ADDRESS

TITLE

NAME

City-St-ZIP

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H33872

(3)

SUNRISE AUTO AIR, INC.

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**FILED** 

Jul 15 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address									
7840 NW 44TH STREET 7840 NW 44TH STREET SUNRISE FL 333\$1-6206 SUNRISE FL 33351-6206							DO NOT WRITE IN THI	S SPACE	
ı							3. Date Incorporated or Qualified		
							12/12/1984		
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For		plied For
21			26				65-0613810	No	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional		
22			27					Fee Re	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23		28					Trust Fund Contribution LJ		
Zip	Country	$\vdash$	Zιp	Cou	ntry		8. This corporation owes or has paid the o		tangible ] No     •
24	25		tarad Asant	30			Personal Property Tax due June 30.  10. Name and Address of New Registere		<u> </u>
	and Address of Curren	negis	Stelen Whell		81	Name	In Hamp and Montess of Heat Hadistere	NAVIII	
RUBINO, STE									
8940 NW 77TH CT STE 107 TAMARAC FL 33321					82	Street Add	ress (P.O. Box Number is Not Acceptable)		
					83				
FAMANAU FL	33321								
				[	84	City	F	85 Zip (	Code
SIGNATURE	ith, and accept the obligation printed upon the printed upon of registered age.						ntion's board of directors. I hereby accept the a		
12.	OFFICERS AND		<del> </del>	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE PD			DELETE	1 1 TI	TLE	T		Change	Addition
NAME RUBINO	), steven			12 N/	AME	[			
STREET ADDRESS B940 N	W 77TH CT STE 107			13 ST	REET	ADDRESS			
City-ST-ZIP TAMAR	AC FL			14 CI	TY-S	a - zie			
TITLE			DFLETE	2.1 10	TLE			Change	Addition
NAME	•			2.2 N/	AME				
STREET ADDRESS				2.3 ST	REFT	ADDRESS	£ *		•
CITY-ST-ZIP				2.4 C	ITY-S	ST-ZIP			
TITLE			☐ DELETE	3 1 TI	TLE			☐ Change	Addition
NAME				3 2 N/	AME				
STREET ADDRESS				3.3 S1	REET	ADDRESS			
CITY-ST-ZIP				3.4. C	1) Y - S	S1-ZIP			
TITLE			DELETE	4.1 1	ILE			Change	Modilion
NAME				4.2 N	IAME				
STREET ADDRESS				4.3 S1	TREET	ADDRESS			
CITY-ST-ZIP				4.4 CI	ITY-S	T-ZIP			

CITY-ST-7IP 14. Thereby 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 supplieriental 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.

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CHY - S1 - ZIP

DELETE

DELETE

(964) 741-3777

Change

Change

Addition

Addition