

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

82

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # H 33872		
1. Corporation Name SUNRISE AUTO AIR, INC.		

Principal Place of Business 7840 NW 44TH STREET SUNRISE FL 33351-6206	Mailing Address 7840 NW 44TH STREET SUNRISE FL 33351-6206
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/12/1984	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0613810	Applied For ☐ Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation owes the current year intangible Personal Property Tax.	☒ Yes ☐ No

8. Name and Address of Current Registered Agent RUBINO, STEVEN 8940 NW 77TH CT STE 107 TAMARAC FL 33321		9. Name and Address of New Registered Agent	
81	Name	82	Street Address (P.O. Box Number if applicable)
83	City	84	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	11 TITLE	
NAME	RUBINO, STEVEN	12 NAME	
STREET ADDRESS	8940 NW 77TH CT STE 107	13 STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL	14 CITY-ST-ZIP	
TITLE	Secretary	21 TITLE	
NAME	Yamil Lobo	22 NAME	
STREET ADDRESS	21501 NW 7th Ct.	23 STREET ADDRESS	
CITY-ST-ZIP	Pembroke Pines, FL 33029	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 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, with all other like empowered.

SIGNATURE: Steven Rubino **STEVEN Rubino** 9/22/99 (954) 741-3722
PRESIDENT

CR2034 (1/98)

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