## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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T.P.R.	SUN CORPORATION				) (48)(0)) <u>0</u> (60 hib) 0(4) hiba hibi 1000	BIĞIK BIĞIK BIŞIK BIRIK GIBIK BIĞIK JADI
Principal Plac	ce of Business	Mailing Addre	ess	11 · 144 · . 44 6 ·		
1140 NW 79TH DRIVE PLANTATION FL 33322			1140 NW 79TH DRIVE PLANTATION FL 33322			
PLANIAIKON	I FL 33322	PLANTATION	FL 33322		3. Date Incorporated or Qualified	3a, Date of Last Report
					12/21/1984	07/11/1995
	Place of Business	2a. Mailing Ad	ridress		4. FEI Number	Applied For
21 Suite, Apt	t #.etc.	26 Surte, Apt	#, etc		59-2514407	Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	ite	City & Sta	le		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	28   Zip	T	Country	Trust Fund Contribution  8. This corporation has liability for in	Added to Fees
24	25	29		30		Yes No
	9. Name and Address of Cur	rrent Registered Agen	it	81 Name	10. Name and Address of New Reg	Istered Agent
	AETA, MARK L., P.A.					
	120 SE THIRD AVENUE F. LAUDERDALE FL 33316			82 Street Add	fress (P.O. Box Number is Not Acceptable	n)
	. LAUDENDALE PL 33310			83		A-1.17.00 (MACABAN WANT OF A A A A A A A A A A A A A A A A A A
				84 City		85 Zip Code
11 Pursuani	I to the provisions of Sections 607	0502 and 607 1508 Fig	inda Statutae	the above named com	poration submits this statement for the pur	FL 89 2 ip Code
office or	registered agent, or both, in the St am familiar with, and accept the ob-	tale of Florida. Such ch	ande was au!	frionzed by the corporati	ion's board of directors. Thereby accept t	he appointment as registered
SIGNATURE:	·	•	77.0000, Flori	C+1 Statutes		
	Styrition type their productions of the potential		(PO.)	Re jedered Agent signature regul	med who crem filting	DATE
12.		AND DIRECTORS				
NAME	Pau		DELETE	13.	ADDITIONS/CHANGES TO OFFICE	
	PSD RAHILL, THOMAS A.		DELETE	13. 11THE	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12  Change Addition
STREET ADDRESS	RAHILL, THOMAS A. 1140 NORTHWEST 79TH (	OR .	DELETE	1 1 TITLE	ADDITIONS/CHANGES TO OFFICE	
DITY-ST-ZIP	RAHILL, THOMAS A.	OR .		11TILF 12 NAME 13 STREET ADDRESS 14 CITY ST-ZIP	ADDITIONS/CHANGES TO OFFICE	Change Addition
CHTY - ST - ZIP TITLE	RAHILL, THOMAS A. 1140 NORTHWEST 79TH (	OR	DELETE	1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST-ZIP 2.1 TILE	ADDITIONS/CHANGES TO OFFICE	Change Addition
DITY-ST-ZIP TITLE NAME	RAHILL, THOMAS A. 1140 NORTHWEST 79TH ( PLANTATION FL	OR		1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST-ZIP 2.1 TILE 2.2 NAME	ADDITIONS/CHANGES TO OFFICE	Change Addition
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CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP	RAHILL, THOMAS A. 1140 NORTHWEST 79TH ( PLANTATION FL	OR	DELETE	1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST-ZIP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TILE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICE	Change Addition Change Addition Change Addition
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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 trusteer improvered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an adverse.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Thomas A. Rahitel 1 96