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Mar 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # H73824

(5)

1. Corporation Name
SU NI INVESTMENTS, INC.



Principal Place of Business

Mailing Address

% SUZETTE PULLARO
320-A W BEARSS AVENUE
TAMPA FL 33613

% SUZETTE PULLARO
320-A W BEARSS AVENUE
TAMPA FL 33613-1228

3. Date Incorporated or Qualified 06/28/1985
3a. Date of Last Report 03/05/1996
4. FEI Number 59-2601423
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

2. Principal Place of Business
2a. Mailing Address
21, 22, 23, 24, 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
PULLARO, SUZETTE
320-A W. BEARSS AVE
TAMPA FL 33613

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL

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 fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Table with 6 rows and 2 columns for Officers and Directors. Includes fields for Title, Name, Street Address, City-St-Zip, and a DELETE checkbox.

Table with 6 rows and 2 columns for Additions/Changes to Officers and Directors in 12. Includes fields for Title, Name, Street Address, City-St-Zip, and checkboxes for Change and Addition.

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: Suzette Pullaro Suzette Pullaro 8-22-97
Date Daytime Phone #

CR2E034 (9/96)