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May 15 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 # J73661

(7)

1. Corporation Name

SUNNINGDALE INVESTMENTS, INC.

Principal Place of Business

9700 GLADIOLUS DR
FT. MYERS FL 33908

Mailing Address

9700 GLADIOLUS DR
FT. MYERS FL 33908-3628

3. Date Incorporated or Qualified

05/20/1987

3a. Date of Last Report

04/30/1996

4. FEI Number

59-2831727

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

27

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

JAY BRETT
2121 W. FIRST STREET
FT. MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name MOHAMED AL-DARSANI

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

9700 Gladiolus dr.

83 Fort Myers, FL 33908

84 City Fort Myers,

FL

85 Zip Code 33908

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

Mohamed Al-Darsani

4/28/1997

Signature of director or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MARTINI, FAEZ
STREET ADDRESS 9640 WINDSOR GONS LN 202
CITY-ST-ZIP FT MYERS FL

TITLE ST ☐ DELETE

NAME FANSA, SAMIR
STREET ADDRESS 9640 WINDSOR GONS LN 202
CITY-ST-ZIP FT MYERS FL

TITLE AS ☐ DELETE

NAME MOHAMED AL-DARSANI
STREET ADDRESS 9700 GLADIOLUS DR.
CITY-ST-ZIP FT MYERS FL 33908

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

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

Mohamed Al-Darsani T.S.

4-28-97

(941) 489-4455

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)