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

FILED

Jan 20 1998 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1998FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J96561 (2)

1. Corporation Name  
SUN GROVES MIAMI, INC.

## Principal Place of Business

33250 SW 210TH AVENUE  
HOMESTEAD FL 33030

## Mailing Address

P. O. BOX 4409  
PRINCETON FL 33032

DO NOT WRITE IN THIS SPACE

## 2. Principal Place of Business

21 33250 SW 210 AVE

Suite, Apt. #, etc.

22 City & State  
23 HOMESTEAD FLA

24 Zip 33030 25 Country USA

## 2a. Mailing Address

26 P.O. Box 4409

Suite, Apt. #, etc.

27 City & State  
28 PRINCETON FLA

29 Zip 33032 30 Country USA

## 3. Date Incorporated or Qualified

10/09/1987

## 4. FEI Number

65-0010914

Applied For

Not Applicable

## 5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.☐

Yes

☐

No

## 10. Name and Address of New Registered Agent

## 9. Name and Address of Current Registered Agent

BERNSTEIN, JEFFREY A  
100 N. BISCAYNE BLVD.  
SUITE 1707  
MIAMI FL 33132

## 81 Name

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

## 83

## 84 City

FL

## 85 Zip Code

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's signature required when reinstating)

DATE

## 12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETEPT  
CHEN, WILLIAM JR  
8741 SW 193RD TERRACE  
MIAMI FLTITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETEVS  
CHEN, CARMEN  
8741 S.W. 193 TERR.  
MIAMI FLTITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETE

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition1.2 NAME ☐ Change ☐ Addition1.3 STREET ADDRESS ☐ Change ☐ Addition1.4 CITY - ST - ZIP ☐ Change ☐ Addition2.1 TITLE ☐ Change ☐ Addition2.2 NAME ☐ Change ☐ Addition2.3 STREET ADDRESS ☐ Change ☐ Addition2.4 CITY - ST - ZIP ☐ Change ☐ Addition3.1 TITLE ☐ Change ☐ Addition3.2 NAME ☐ Change ☐ Addition3.3 STREET ADDRESS ☐ Change ☐ Addition3.4 CITY - ST - ZIP ☐ Change ☐ Addition4.1 TITLE ☐ Change ☐ Addition4.2 NAME ☐ Change ☐ Addition4.3 STREET ADDRESS ☐ Change ☐ Addition4.4 CITY - ST - ZIP ☐ Change ☐ Addition5.1 TITLE ☐ Change ☐ Addition5.2 NAME ☐ Change ☐ Addition5.3 STREET ADDRESS ☐ Change ☐ Addition5.4 CITY - ST - ZIP ☐ Change ☐ Addition6.1 TITLE ☐ Change ☐ Addition6.2 NAME ☐ Change ☐ Addition6.3 STREET ADDRESS ☐ Change ☐ Addition6.4 CITY - ST - ZIP ☐ Change ☐ Addition

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 as an attachment with an address.

SIGNATURE

CR2E034 (10/97)