


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # K17070 1. Entity Name SUN PERIODICAL CORP.	
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Principal Place of Business 2105 NW 102 AVENUE MIAMI, FL 33172 US	Mailing Address 2105 NW 102 AVENUE MIAMI, FL 33172 US
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02282006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0036610

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent BRUNJES, ROBERT F. 2105 NW 102 AVENUE MIAMI, FL 33172
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**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V BRUNJES, ROBERT F. 10751 SW 27 STREET DAVIE, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V BOHORQUES, JOSE A. 9385 SW 21 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P GELFAND, ARTHUR ONE EXECUTIVE DR #151 SOMERSET, NJ 08873
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T ROMERO, ORLANDO 2105 NW 102 AVE MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

1101000458279
03/16/06-80023-009 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **Orlando Romero** 7/2/06 305-542-2919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #