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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **K23881**

(1)

HOT SUNSATIONALS INC.

CITY - S1 - ZIP

ann an officer or direct appears in Block 12 er

SIGNATURE

Principal Place of Business Mailing Address 1861 NW 105TH AVE. 1861 NW 105TH AVE PLANTATION FL 33322-3534 PLANTATION FL 33322 3. Date Incorporated or Qualified 3a. Date of Last Report 05/13/1988 07/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0047104 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žφ Country Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes
No 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RI Name AMAR, JACKY 1861 N.W. 105TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33322 83 City 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 Signer in typical or printed name of registered agent and title if applicable. (NCTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. PD DELETE Change Addition TITLE 1.1 TITLE AMAR, JACKY NAME 1.2 NAME 1861 N.W. 105TH AVE. STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL 33322** 1.4 CiTY-ST-ZIP CITY-ST-ZIP VD. DELETE Change Addition THLE 2.1 TETLE AMAR, ORNA 2.2 NAME NAME 1861 N.W. 105TH AVE. 2.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 33322 2. 4 CITY - ST - ZIP CITY - ST- ZIE DELETE 3.1 TITLE Change ____ Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREE: ADDRESS 3.4. CITY - ST - ZIP CHTY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - \$1 - ZIP DELETE 5.1 TITLE Change ☐ Addition TITLE 52 NAME NAME STREET ADDRESS 53 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 61 TITLE Change TITLE NAME 6.2 NAME STREET ADDRESS 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)(f), Florida Statutes. I further certify that the information indicated on this annual report of 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 effection of the contraction of

Date

Daytime Phone #

SIGNATURE AND TYPED OR SPUTED NAME OF SIGNATURE OF FICE POR DISECTOR