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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 10 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # K33826** 

(4)

RNT SUNILAND, INC.

**SIGNATURE:** 

Principal Place of Business Mailing Address							
Principal Place of Business 9990 SW 77TH AVENUE SUITE 402 MIAMI FL 33156	•	9990 SW 77TH AVENUE SUITE 402					
				Date Incorporated or Qualified     09/23/1988	3a. Date of 05/01/1		port
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	, <u>, , , , , , , , , , , , , , , , , , </u>		olied For
21   Suite. Apt. #, etc.	Suito, Apt #, etc.			65-0076534	&	Not <b>8.75</b> A	Applicable
Stille, Apr. #, etc.	27			5. Certificate of Status Desired		Fee Rec	
City & State	City & State			6. Election Campaign Financing		\$5.00 +	Viay Be
23	28	·		Trust Fund Contribution		Added to	
Zip Country	Zip	Country		This corporation has liability for Florida Statutes	intangible tax i	under s. o	199.032,
24 25 9. Name and Address of Current	29 Registered Agent	30		10. Name and Address of New R			
ATLANTIS REGISTERED AGENTS INC		81 N	lame				
25 SE 2ND AVE #919		<b>82</b> S	Stroot Addre	ss (P.O. Box Number is Not Accepta	hle)		
% GERALD DAMSKY		02	ilidel Voole	as () .O. Dox Hambol is Hot Necopic			
MIAMI FL 33131		83					
		<b>84</b> C	City		F. 8:	5 Zip C	ode
	COT LCCC FILT L CLL	1		anting as books this statement for the	FL °	poino ite	registered
Pursuant to the provisions of Sections 607,0502 office or registered agent, or both, in the State of agent. Familianiliar with, and accept the obligations.	and 607.1508, Florida Statu Florida. Such change was	tes, the above-na authorized by th	amed corpo e corporatio	ration submits this statement for the in's board of directors. I hereby acco	purpose of cha opt the appointr	nging is nent as r	registered
agent if amiliar with, and accept the obligati	ons of, Section 607.0505, F	lorida Statutes.					
Signature System protect name of registered agent	and ritle it applicable. (NO	TE Registered Agent &	gnature required	d when reinstating)	DATE		
12. OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF			
TITLE DC	☐ DELETE	1.1 HTLE			L	Change	Addition
NAME BURGER, ALVIN		1.2 NAME					
STREET ADDRESS 9900 SW 77TH AVENUE #402		1.3 STREET ADD	DRESS				
CHY-ST ZIP MIAMI FL	DELETE	1.4 CiTY-ST-Z	iP			Change	Addition
DVS CANDOA	[""] DETC+E	2.1 TITLE 2.2 NAME	i		لــا	Ollange	radillori
BURGER, SANDRA STREET ADDRESS 9990 SW 77TH AVENUE #402		2.3 STREET ADI	nacce				
		2.4 CITY-ST-2	i				
City-S1 ZiF MIAMI FL	DELETE	3.1 TITLE	211			Change	Addition
BURGER, ANDREW		3.2 NAME			*		
SUB-FLADORESS 9990 SW 77TH AVENUE #402		3.3 STREET ADD	DRESS				
CITY-ST-20F MIAMI FL		3.4. CITY - ST - A	ZIP				
THE	☐ DELETE	4.1 TITLE			. ⊔	Change	Addition
NAME .		4. 2 NAME					
STREET ADDRESS:		4.3 STREET AD	DRESS				
City St - 76°	Dr. etc	44 CITY-ST-Z	(tP		— П	Change	Addition
THE	DELETE	51 TITLE		:		enange	- rounted
NAME		5.2 NAME	DOLLEC	•			
STREET ADDRESS		5.3 STREET ADI					•
CITY - S1 - ZP	☐ DELETE	61 TITLE	.ir			Change	Addition
NAME		62 NAME	1			-	
STREET ADDRESS		6.3 STREET AD	ORESS	•			
CHY-SI-78		6.4 CITY - ST - Z					

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.