

2002 UNIFORM BUSINESS REPORT (UBR)

0064595 AV

DOCUMENT # **K41116**

1. Entity Name
SUN-SATIONAL PROMOTIONS, INC.

FILED

02 AUG -5 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**2715 N OCEAN BLVD
#16E
FORT LAUDERDALE FL 33308
US**

Mailing Address
**2715 N OCEAN BLVD
#16E
FORT LAUDERDALE FL 33308
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0078669**
Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FIEDEL, AL
2715 N OCEAN BLVD
#16E
FORT LAUDERDALE FL 33308**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FIEDEL, AL 2715 N. OCEAN BLVD. 16E FT. LAUDERDALE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	600006971976-7 -08/08/02--01037--006 ****150.00 ****150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SICILIA FIEDEL**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **July 29-2002** Daytime Phone # **954-863-8200**

CR2E034 (4/02)

Attachment

#K41116

July 30-2002



Sunsational
Promotional Products

To Whom it May Concern:

YESTERDAY I
RECEIVED FOR THE 1ST TIME YOUR
FORM 2002. I WAS OUT OF

THE COUNTRY THE BETTER PART
OF 3-4 MONTHS + ALSO DOWN
INTO THE CARIBBEAN

I CLOSED OFF MY
P.O. BOX THAT RECEIVED
MOST OF MY MAIL

THIS FORM JUST
SURFACED + I IMMEDIATELY
CALLED MR MAC AT
850-488-9000.

HE SUGGESTED I
ENCLOSE A CHECK AND A
SHORT EXPLANATION OF WHAT
HAPPENED. I A TERRIBLE SORRY
FOR THIS INCONVENIENCE.

THANKING YOU

AL KHALIL