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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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DO NOT WRITE IN THIS SPACE

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L43358 (5)

1. Corporation Name
SUNSET HARBOUR CAFE, INC.

Principal Place of Business Mailing Address

**11098 BISCAYNE BLVD.
PENTHOUSE SUITE
N. MIAMI FL 33161-7498**

**11098 BISCAYNE BLVD.
PENTHOUSE SUITE
N. MIAMI FL 33161-7498**

2. Principal Place of Business 2a. Mailing Address

21 11098 Biscayne Blvd. **26 11098 Biscayne Blvd.**

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 402 **27 402**

City & State City & State

23 North, FL **28 North Miami, FL**

Zip Country Zip Country

24 33161 25 US **29 33161 30 US**

9. Name and Address of Current Registered Agent

**BEDZOW, MICHAEL
20803 BISCAYNE BLVD
SUITE 200
AVENTURA FL 33180**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **B5 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 _____

12. OFFICERS AND DIRECTORS

1.1 TITLE **PTD**
1.2 NAME **SHAPIRO, HOWARD**
1.3 STREET ADDRESS **11098 BISCAYNE BLVD, SUITE 402-**
1.4 CITY ST ZIP **MIAMI FL**

2.1 TITLE **VS**
2.2 NAME **BLANCO, CAMILLO**
2.3 STREET ADDRESS **11098 BISCAYNE BLVD, SUITE 402**
2.4 CITY ST ZIP **MIAMI FL**

3.1 TITLE **D**
3.2 NAME **BEDZOW, CHARLES**
3.3 STREET ADDRESS **11098 BISCAYNE BLVD, SUITE 402**
3.4 CITY ST ZIP **MIAMI FL**

4.1 TITLE **D**
4.2 NAME **BEDZOW, SARA**
4.3 STREET ADDRESS **11098 BISCAYNE BLVD, SUITE 402**
4.4 CITY ST ZIP **MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS **11098 Biscayne Blvd., Suite 402**
1.4 CITY ST ZIP **North Miami, FL 33161**

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS **11098 Biscayne Blvd., Suite 402**
2.4 CITY ST ZIP **North Miami, FL 33161**

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

14. I hereby certify that the information supplied with this filing voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 by an attachment with an addition.

SIGNATURE:  **4/17/95** **591795J**

BEDZOW, MICHAEL
DIRECTOR