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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # L49395** 

(1)

SUNRISE REALTY AND INVESTMENTS, INC.

Principal Place of Business Mailing Address **%BENDTSEN GEORGE** \*BENDTSEN GEORGE 13 SOUTH WASHINGTON ST 13 SOUTH WASHINGTON ST **BEVERLY HILLS FL 32665** BEVERLY HILLS FL 34465-3663 3. Date Incorporated or Qualified 3a. Date of Last Report 02/07/1990 04/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3015814 Not Applicable 26 Suite, Apt. #, etc \$8.75 Additional Suite, Apt. #, etc. X 5, Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Ζφ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes XX No 29 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BENDTSEN GEORGE 13 S WASHINGTON ST 82 Street Address (P.O. Box Number is Not Acceptable) **BEVERLY HILLS FL 32665** 83 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE SANTANGELO, PETER 1.2 NAME 24 RICKY LANE 1.3 STREET ADDRESS STREET ADDRESS **NORWALK CT** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIF DELETE \_\_\_ Addition ☐ Change THILE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 34. CITY-ST-ZIP DELETE 41 TITLE ☐ Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY - \$1 - 7/P DELETE 51 TITLE ☐ Change Addition TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - S1 - ZIP 54 CITY-ST-ZIP DELETE Addition Change 61 TITLE TITLE 62 NAME NAME

63 STREET ADDRESS

SIGNATORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

64 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)(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

FILED
Jan 22 1997 8:00am
Secretary of State

