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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

SUNRISE TITLE, INC.

SIGNATURE:

## Mar 10 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					hir Brass Brass Asalt Blast 1964
7771 W OAKLAND PARK BLVD		7771 W OAKLAND PARK I	BVD		
STE 131		STE 131			•
SUNRISE FL 33351		SUNRISE FL 33351		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified	
Dissipul Di	and Discourage	T Acres Address		02/15/1990	
L '	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc		Suite, Apl. #, etc.	· · · · · · · · · · · · · · · · · · ·	65-0187192	Not Applicable
22		27		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Z(p)	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registere	d Agent
STE	INBERG, ABBY L.		81 Name		
7771 W OAKLAND PARK BVD STE 131			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUNRISE FL 33351					
			83		
			84 City		85 Zip Code
			'   '	<b>F</b>	
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 register office or registered agent, or bott 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 tanylas with, and acquar the on gallons of, Sapron 607/0505, Elsylda Statutes.					
SIGNATURE	Mity w stunge	K YOUN - O	tunbuz	<u> </u>	1118
12.	Signative typed or protect radio (Frags tore Targe OF LICERS ANI		Registered Agent signature req	Ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORS IN 12
TOLE	PVS	DELETE	1.1 TOLE	ADDITIONS/CHANGES TO OTHICENS A	Change Addition
NAME	STEINBERG, ABBY		1.2 NAME		
STREET ADDRESS	7771 W OAKLAND OPARK BI	LVD STE 131	1.3 STREET ADDRESS		
CITY-ST-ZIP	SUNRISE FL		1.4 CITY - ST - ZIP		
TITLE	T	DELFTE	21 TITLE		Change Addition
NAME	STEINBERG, ABBY		2 2 NAME		
STREET ADDRESS	7771 W OAKLAMD PARK BLV	/D STE 131	2 3 STREET ADDRESS		
CITY-ST-ZIP	SUNRISE FL		2.4 CITY-ST-ZIP		
TITLE		DELFTE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		€ DEFELE	5.1 TITLE		Change
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP		T buere	5.4 City - ST - ZIP		Change   Addition
TITLE		[_] DELETE	61 TITLE		Change Addition
NAME			62 NAME		•
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		(a) at 1 (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	6.4 CITY-ST-ZIP	in Section 110.07/2Vi) Storida Statutas   further	andity that the information