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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L75760

(3)

SUNRISE CREATIVE BUSINESS, INC.

FILED

Apr 02 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address						I (BNIID) Eir ibatt diest biete beite batt bitte albeit anter anter anter anter anter	
1427 S.W. 47T	H TERRACE		1427 S.W. 47TH TERRACE	1427 S.W. 47TH TERRACE			
CAPE CORAL FL 33914			CAPE CORAL FL 33914				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							05/23/1990
2, Principal Pla	ace of Rusin	nee	2a. Mailing Address	2a Mailing Address			4, FEI Number Applied For
21	20 0 01 200111	000	26				65-0195879 Not Applicable
Suite, Apt. i	#. etc.		Suite, Apt. #, etc.				S8.75 Additional
22	•		27	27			5. Certificate of Status Desired Fee Required
City & State	3		City & State				6. Election Campaign Financing \$5.00 May Be
23			28	28			Trust Fund Contribution Added to Fees
Zip Country			Ζιρ	Zip Country			8. This corporation owes or has paid the current year intangible
24 25			29				Personal Property Tax due June 30. Yes No
9, Name and Address of Current Registered Agent 81 Name							10. Name and Address of New Registered Agent
SEEMANN, ERNEST A ESQ.						Name	
472	9 DEL PRA	DO BLVD.		ļ ē		Street A	ddress (P.O. Box Number is Not Acceptable)
CAPE CORAL FL 33904							
				1	83		
				ŀ	84	City	B5 Zip Code
					_	,	FL
11. Pursuant t	to the provisi	ons of Sections 607.05	02 and 607.1508, Florida Statute	es, the at	OVE	-named o	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
agent. Far	egistered agi m fam iliar wit	h, and accept the obli	gations of, Section 607.0505, Flo	rida Stati	utes	ine corpo i.	Training board of directors. Thereby accept the appointment as registered
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent					nt signature re		
12.		OFFICERS A	ND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	PD		[] OELETE	1.1 TIT		- 1	Change D Addition
NAME		HERBERT		1.2 NA		1	
STREET ADDRESS		47TH TERRACE				ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL 33914		DELETE		1.4 CITY-ST-ZIP		Change Addition
TITLE			[] Offere	2.1 TIT			
NAME				2.2 NA			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP			DELETE	2. 4 C/TY - ST - Z/P 3.1 T/TLE		51 - ZIP	Change Addition
TITLE			C) otter	3.2 NAME			Change Kodillor
NAME				1		1000000	
STREET ADDRESS				•		ADDRESS	
CITY-ST-ZIP		····	DELETE	3.4. CI 4.1 TIT		31 - ZIP	Change Addition
TITLE			(DECENT	4.1 111 4. 2 N/		-	Change Twanter
NAME AXDEST ADDRESS				1		ADDOCEC	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP TITLE		<u> </u>	☐ DELETE	4.4 CH 5.1 TiT		1 - Zir	Change Addition
				5.2 NA		-	
NAME CTOSET ADDOSECS						ADDRESS	
STREET ADDRESS				5.4 CII			
CITY-ST-ZIP TITLE			DELETE	6.1 Til		1 4.11	Change Addition
NAME				6.2 NA		-	_ · · -
STREET ADDRESS						ADDRESS	_
CITY-ST-ZIP				6.4 CII			Λ
44 Lhoroby o	ertify that the	e information supplied	with this filing does not qualify fo	or the eye	mn	tion stated	in Section 1907(3)(i), Florida Statutes. I further certify that the information
indicated on this annual roport or supplemental annual report is true and accurate and that my signature strain haye 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,							
		71.4	<i>i</i>		_		-0/1// h.