2000 UNIFORM BUSINESS REPORT (UBR)						FI SECRETAR	LED Y OF SE			
DOCUMENT # L9800001856					DIV	SECRETARY OF S: DIVISION OF CORPOR).				
1. Entity Name SUNSWEET INTERNATIONAL L.L.C.					00	00 FEB 22 PH 12: :.				
30143442	ET INTENNATIONAL E.E.O	•								
Principal Plac	ce of Business	Mailing Address								
7045 N.W. 46 STREET 7045 N.W.										
MIAMI FL 33166 MIAMI FL 33166-5605			5			((68)(a), a, a, b, a			A111A B1J1 (BB1	
				. 						
2. Principal Place of Business 3. Mailing Address						1881 1 88 188 188 188 188 188 188 188 188 188 188 188 188 188 188 188 188	! INJII NDI11 BN111 BUII1 1		\$111E BILL 1881	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI N	Number 65	0867653		plied For		
Zip	Country	Zip C		try \$5.00 Additional			ot Applicable ditional			
-	6 Name and Address of Current Posicional Agent				Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent					
6. Name and Address of Current Registered Agent				Name						
GRAY, RICHARD V ESQ.				Street Address (P.O. Box Number is Not Acceptable)						
2701 LEJEUNE ROAD, SUITE 405 CORAL GABLES FL 33134				<u>-</u>						
CONAL GABLES FL 33134				City FL Zip Code						
								rl -		
8. The above	named entity submits this statement	for the purpose of changing	ng its registere	ea office or regi	stereo agent,	or both, in the	State of Florida.			
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable.	(NOTE: Registere	d Agent signature req	uired when reinstat	ing)	D/	ATE		
	· · · · · · · · · · · · · · · · · · ·	į.	E NOW!!!	FEE IS \$50.0	<u> </u>					
		,,		o Departmen		 				
9.	MANAGING MEM	BERS/MEMBERS	10.				DDITIONS/CHAN	GES		
TITLE	MGRM	□ Delete	TITL	E		<u>·</u>		Change	Addition	
NAME STREET ADDRESS	BALVA, UDI 7045 N.W. 46 STREET		NAM - stri	EET ADDRESS			ı			
CITY-ST-ZIP	MIAMI FL 33166			- ST- ZIP	W	2)291	00			
TITLE	MGRM	☐ Oelets	nπ	l l	1			Change	Addition	
NAME STREET ADDRESS	Badal, Rey 7045 N.W. 46 Street		MAM Stri	EET AODRESS						
CITY-ST-ZIP	MIAMI FL 33166	·		- \$T-ZIP		11111	<u> </u>	5951 -	Addition	
TITLE NAME	· •	Cleiste	TITU Nam	- 1		100) 			
STREET ADDRESS		James Agent March	STRE	ET ADDRESS	- 1		*****50.0	() ******	0.00	
CITY- 8T- ZIP				-ST-ZIP			<u>.</u>	Change	Addition	
TITLE NAME		☐ Detate	TITLI	l l				☐ (dianye		
STREET ADDRESS	j			EET ADDRESS - 8T-ZIP						
CITY- #T- ZIP	· · · · · · · · · · · · · · · · · · ·	□ Delete	TITU					Change	Addition	
NAME			NAM	IE .					_ "	
STREET ADDRESS C),TY-ST-ZIP		· N		EET ADDRESS - 8T- ZIP						
TILE	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	Delete	TITLE					☐ Change	Addition	
			NA 44							

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS CITY-8T-ZIP

STREET ADDRESS

CITY-ST-ZIP



02/14/2000