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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M36112

SUNSHINE WAREHOUSES F.L.B., INC.

Principal Place of Business Mailing Address

109 SE 3 CT 1150 NW 13 ST

DEERFIELD BCH FL 33441 264C

US BOCA RATON FL 33486

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90079 040 ***150.00



DEERFIELD BCI US	1 FL 33441	BOCA RATON FL 33486				DO NOT WRITE IN THIS SPACE			
03		US				3. Date Incorporated or Qualifed			
						08/01/1986			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			Applied For
21	26					59-2703107			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			-					\$8.7	5 Additional
22 27						Certifcate of Status Desired		Fee	Required
City & State	B	City & State				6. Election Campaign Financing		\$5.0	0 May Be
23	28					Trust Fund Contribution		Adde	ed to Fees
Zip	Country	Zip	Country			8. This corporation owes the curre	ent year Inta	ngible	
24	25 29 30					Personal Property Tax.		Yes	□No
		10. Name and Address of New Registered Agent							
TJARKS, FRANK F.				1 Name 2 Street Address (P.O. Box Number is Not Acceptable)					
									1150 NW 13 ST
264C			83	83					
BOCA RATON FL 33486			\	<u> </u>				11-	
			84	C	City		FL	85 Z	ip Code
44 Purement	to the provisions of Sections 607 0	502 and 607.1508, Florida Statutes	the above	e-na	amed corpora	ation submits this statement for the	purpose of c	hanging	its registered
office or r	egistered agent, or both, in the Sta	te of Florida. Such change was autigations of, Section 607,0505, Florid	nonzed by	tne	corporation's	s board of directors. I hereby accep	t the appoin	tment as	registered
agent. i a	m ramiliar with, and accept the obli	igations of, Section 607,0505, Fibrio	a Statutes	٠.					
SIGNATURE	Signature, typed or printed name of registered a	arrent and title if applicable (NOTE: R	egistered Aper	nt sıar	nature required wh	hen reinstating)	DATE		
12. OFFICERS AND DIRECTORS				13.		ADDITIONS/CHANGES TO OF	FICERS ANI	DIREC	TORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE					☐ Chang	re Addition
NAME	TJARKS, FRANK F.		1.2 NAME						
STREET ADDRESS	1150 NW 13 ST 264C		1.3 STREE	TADD	DRESS				}
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-S						ļ
TITLE	BOOK HATON I E	DELETE	2.1 TITLE		- -			☐ Chang	e Addition
NAME			2.2 NAME						ţ
STREET ADDRESS			2.3 STREET ADDRESS		DRESS				
			2. 4 CITY-ST-ZIP						
CITY-ST-ZIP	DELET		3.1 TITLE		-			Chang	e Addition
			3.2 NAME					_ `	_
NAME			3.3 STREE	T ADO	ODE66				ļ
STREET ADDRESS					i				1
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-S 4.1 TITLE	31-ZIF	<u> </u>			Chang	ge Addition
			4. 2 NAME)				-
NAME					DOLES				
STREET ADDRESS			4.3 STREE						ļ.
C/TY-ST-ZIP		☐ DELETE	4.4 CITY-S 5.1 TITLE	r-ZIP	<u> </u>			Chang	ge Addition
TITLE			5.1 IIILE 5.2 NAME		ĺ				,
NAME			5.3 STREE	ተ ልቦሩን	DDEGS				}
STREET ADDRESS					1				}
CITY-ST-ZIP		- DOI ETT	5.4 CITY-S 6.1 TITLE	1-ZIP	<u>-</u>		 -	Chang	ae Addition
TITLE 🔍		DELETE						- Chan	المساسم في مو
NAME			6.2 NAME						
STREET ADDRESS	,		6.3 STREE						ľ
CITY-ST-ZIP	<u> </u>		6.4 CITY-S	T-ZIP	<u>P</u>				

14. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

TUNE AND REPORT PRINTED JAME OF SIGNING OFFICER OR DIRECTOR

4-35-9 Date

56-417-8793

CR2E034 (11/98)