## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M68383

(2)

SUNNILAND DINETTES, INC.

## FILED Sep 17 1997 8:00am Secretary of State



Principal Place	of Business	Mailing Address		n idminati iša diidi idiad iildi ididi ididi	is minis dræte øsksi hintt albit hibit tådt	
C/O JOSEPHINE KUCZENSKI C/O JOSEPHINE KU		C/O JOSEPHINE KUCZEN	ISKI			
1920 N.E. 5TH AVENUE		1920 N.E. 5TH AVENUE				
BOCA RATON FL 33431-7702		BOCA RATON FL 33431-7702			DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	3a. Date of Last Report	
6 Data de el Ol	ace of Business	<b>A.</b> 11-11-4 Add		02/10/1988	03/26/1996	
	A. F. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2a. Mailing Address	Federal Hw	4. FEI Number	Applied For	
21 /867			Parial 11w	<b>y</b> ⋅ 65-0028207	Not Applicable	
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22 City & State		City & State	<u></u>			
City & State 23 60 Ca	Raton, Fl.	28 Bora Rato	n Fl	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
241 <b>3</b> 34	187 25 Pela Boach	<sup>Zip</sup> 33487	Country 30 Palm Bes	8. This corporation owes or has pare		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
KUCZENSKI, JOSEPHINE 81 Name Tosachina Kuczenski,						
	20 N.E. 5TH AVENUE		renski'			
BOCA RATON FL 33431				ddress (P.O. Box Number is Not Acceptab		
	ON TO HEALT IN THE STATE OF THE		83	100 1 100 1 FOC	<u> </u>	
			84 City	Bora Raton	FL 85 7 20 Code 87	
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.						
•	n familiar with, and accept the obligat	ions of, Section 607.0505, Flor	rida Statutes.	randito board of offoctors, I floroby docep	the appointment as registe of	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Registered Agent signature re	equired when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Acdition	
NAME	KUCZENSKI, JOAL		1.2 NAME			
STREET ADDRESS	19588 CAROLINA CIRCLE		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - \$T - ZIP		)	
TITLE	DP	DELETE	2.1 TITLE		Change Addition	
NAME	KUCZENSKI, JOSEPHINE		2.2 NAME			
STREET ADDRESS	19588 CAROLINA CIRCLE		2.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		2 4 City-St-ZiP			
TITLE		DELETE	3 I TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-2IP			3.4 CITY-S1-ZIP		\	
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME		_	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			44 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-S1-2IP		ì	
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
		- ALCON				
NAME CTOCET ADDDESS			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		\	
CITY-ST-ZIP	w certify that the information supplied	with this filing does not a selif-	64 CITY-ST-ZIP	tod in Section 119 07/33/i) Florida Statuto	Lifuriber certifu that the	
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 appears in Block 12 or Block 3 if changed, or on an attachment with an address.						