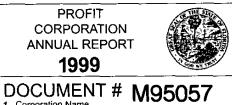
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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

05-06-1999 90293 005 \*\*\*900.00

MEMORI	al sunset park, inc.						11 <b>4</b> 11 <b>111</b> 11 <b>111</b> 11	<b>1181 BIB</b> II 1881
								bieki alaki idek
Principal Place	of Business	Mailing Address			Ì			
11655 S.W. 117TH AVENUE 1201 S ORLANDO AVE								
MIAMI FL 33186		STE 365 WINTER PK FL 32789			İ	DO NOT WRITE IN THIS	SPACE	
		US			-	3. Date Incorporated or Qualifed		
					İ	08/19/1988		{
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For
21		26				65-0103104	No.	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional
22		27				5. Certificate of Status Desired	Fee R	equired
City & State	9	City & State			ĺ	6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	_ Country	4	-	8. This corporation owes the current year In		<b>⊠</b> No
24	25	29 3	0			Personal Property Tax.  10. Name and Address of New Registered	Yes	ZSINO
<del></del>	9. Name and Address of Current	Registered Agent	81	Name		CT CORPORATION SYS		- ——
ROM	ANACH, GABRIEL			1101110		- CI CORPORATION 310	)   [ ]	
	5 S.W. 117TH AVE		82	Street	Address	1200 PINE ISLAND ROA	.D	
	AI FL 33186		83	.}			-	
		•		l		_		
	1		84	City		PLANTATION, FL 33324	i	е
44 Dureuant	to the provisions of Sections 607 0502	2 and 607 1508. Florida Statutes	the abov	e-named	corpora			registered
office or n	egistered a ent, or both, in the State	Florida. Such change was aut	norized by	the corpo	oration's	ation submits this statement for the purpose of s board of directors. I hereby accept the appo	intment as re	egistered
agent. I a	m familiar with, and accept the obligat	or, Section 607.0505, Flond	a Statutes	s. A'	ID.	3/11/9	Q	
SIGNATURE	Signature, typed or printed name of registered agent		egistered Age	nt signature n	w benupe	nen reinstatung) DATE	<b></b>	
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	
TITLE	PAS	☐ DELETE	1.1 TITLE		DΛ	P/AS	Change	Addition
NAME	ROMANCH, GABRIEL		1.2 NAME			FRON, BRENT F.		,
STREET ADDRESS	11655 SW 117TH AVE		1.3 STREE	T ADDRESS		1 S ORLANDO AVE #365		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		_WIN	NTER PARK, FL 32789		
TITLE	D DELETE			2.1 TITLE AS			☐ Change	Addition
NAME	ROWE, W E					AHAN, LORALICE A.		
STREET ADDRESS	110 VETERANS BLVD.				1	VETERANS MEMORIAL BLVD		
CITY-ST-ZIP	METAIRIE LA		2.4 CITY-	ST-ZIP	ME	TAIRIE, LA 70005		THE ALLEYS
TITLE	AS	DELETE	3.1 TITLE		D		Change	Addition
NAME	PATRON, RONALD H	_	3.2 NAME		HEN	IICAN, JOSEPH P. III		
STREET ADDRESS	110 VETERANS MEMORIAL BLV	ľU	3.3 STREE	TADDRESS		VETERANS MEMORIAL BLVD		
CITY-ST-ZIP	METAIRIE LA		3.4. CITY-	ST-ZIP		AIRIE, LA 70005	Chart	D Addition
TITLE	AS WENNETH O	☐ DELETE	4.1 TITLE		P/A	<del>-</del>	Change	Addition
NAME	BUDDE, KENNETH C	•	4. 2 NAME			MANACH, GABRIEL A. 0 BIRD ROAD		
STREET ADDRESS	110 VETERANS MEMORIAL BLV	ש		TADORESS		MI, FL 33155		
CITY-ST-ZIP	METAIRIE LA	S PER CALL	4.4 CITY-S	ST-ZIP		1411, 1 L 00 100	Change	[] Addition
TITLE	S	DELETE	5.1 TITLE 5.2 NAME	;	T/S	TARAMARE EDANIZI	CH CHAIRGE	
NAME	OLVEY, C I			TADORESS		「ASAVAGE, FRANK L. 1 S ORLANDO AVE #365		]
STREET ADDRESS	1201 S. ORLANDO AVE., #365		5.4 CITY-5			TER PARK, FL 32789		
CITY-ST-ZIP	WINTER PARK FL 32789	DELETE	6.1 TITLE			TEI(17/10, 1 E 02/00	Change	[] Addition
TITLE	MATASAVAGE, FRANK L	L) DECEIL	6.2 NAME		D	M/E M/II I I A M E	Shango	
NAME	2400 HARRELL RD		1	T ADDRESS	b .	WE, WILLIAM E. I VETERANS MEMORIAL BLVD		
STREET ADDRESS	ORLANDO FL		8.4 CITY-5			TAIRIE, LA 70005		j
CITY-ST-ZIP			■ U 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 applemental 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Brent F. Heffron

April 14, 1999 (407) 740-7000