

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N29504 (0)
1. Corporation Name
SUNRISE OPPORTUNITIES, INC.



Principal Place of Business: 9040 SUNSET DRIVE, SUITE 70A, MIAMI FL 33173, US
Mailing Address: 9040 SUNSET DRIVE, SUITE 70A, MIAMI FL 33173, US

3. Date Incorporated or Qualified: 11/30/1988
4. FEI Number: 65-0118734
Applied For: Not Applicable

2. Principal Place of Business (21-24) and Mailing Address (2a-24) details including Suite, Apt. #, etc., City & State, Zip, and Country.

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: LEECH, LESLIE W. JR., 9040 SUNSET DRIVE, SUITE 70A, MIAMI FL 33173

10. Name and Address of New Registered Agent (81-85) details including Name, Street Address, City, State (FL), and Zip Code.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	MCCARTHY, RICHARD H.	1.2 NAME	YOUNG, PAULA
STREET ADDRESS	5041 SW 94TH COURT	1.3 STREET ADDRESS	12805 SW 103 COURT
CITY-ST-ZIP	MIAMI FL 33165	1.4 CITY-ST-ZIP	MIAMI FL 33176
TITLE	D	2.1 TITLE	D
NAME	TUCKER, GERALDINE	2.2 NAME	SMITH, RICHARD
STREET ADDRESS	8100 SW 133RD COURT	2.3 STREET ADDRESS	8971 SW 72 STREET, APT. 329
CITY-ST-ZIP	MIAMI FL 33183	2.4 CITY-ST-ZIP	MIAMI FL 33173
TITLE	D	3.1 TITLE	D
NAME	GREENBERG, BARNETT	3.2 NAME	SOUTO, JOSE E.
STREET ADDRESS	7761 SW 176TH STREET	3.3 STREET ADDRESS	9375 BALADA STREET
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	CORAL GABLES FL 33156
TITLE	P	4.1 TITLE	S/T
NAME	LEECH, LESLIE W JR.	4.2 NAME	WEEKS, JAMES G.
STREET ADDRESS	9040 SUNSET DRIVE, SUITE 70A	4.3 STREET ADDRESS	9040 SUNSET DRIVE
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	MIAMI FL 33173
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 1/27/98 (305) 596-9040
Signature and typed name of registered agent and title if applicable Date Daytime Phone # 0032940

CR2E037 (10/97)