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FILED
Jul 04, 2002 8:00 am
Secretary of State
06-11-2002 90151 002 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000066651

1. Entity Name
Sunny Isles Exclusive Realty, corp

DO NOT WRITE IN THIS SPACE

96463

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2. Principal Place of Business	3. Mailing Address
16688 Collins Ave	16688 Collins Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sunny Isles, FL	City & State: Sunny Isles, FL
Zip: 33160 Country: DADE	Zip: 33160 Country: DADE

4. FEI Number: 65-1142573 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: GASILOVSKIY, YEVGENIY

Street Address (P.O. Box Number is Not Acceptable): 16688 Collins Ave

City: Sunny Isles, FL 33160 — FL — Zip Code: 33160

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

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

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT, DIRECTOR
NAME	YEVGENIY GASILOVSKIY
STREET ADDRESS	16688 Collins Ave
CITY-ST-ZIP	Sunny Isles, FL 33160
TITLE	
NAME	
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CR2E034B (12/01)

13. 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 or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ YEVGENIY GASILOVSKIY 05/20/02 305 949 5939
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #