

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90025 015 ***150.00

DOCUMENT # P02000020501

1. Entity Name
SUNSET DEVELOPMENT CORP.



Principal Place of Business
**68 FIESTA WAY
FORT LAUDERDALE, FL 33301**

Mailing Address
**68 FIESTA WAY
FORT LAUDERDALE, FL 33301**



03202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
37-1439120

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MURDOCH, ROBERT E
~~790 E BROWARD BLVD STE 400~~ **2455 East Sunrise Blvd.**
FT LAUDERDALE, FL 33301 **Suite 1000**
33304

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligation of, the registered agent.

SIGNATURE

[Signature]

3/23/06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GALLUZZO, GEORGE R JR
STREET ADDRESS	68 FIESTA WAY
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301
TITLE	VP
NAME	THEIS, WILLIAM E JR
STREET ADDRESS	68 FIESTA WAY
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301
TITLE	D
NAME	THIES, JAMES H
STREET ADDRESS	68 FIESTA WAY
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/06

Date

954 752 9085

Daytime Phone #