

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT #** P93000007248**1. Entity Name**

Sun Promotions US, Inc. ✓

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90129 047 ***150.00

A0062954

DO NOT WRITE IN THIS SPACE

Principal Place of Business 207 Club Drive -PGA Palm Beach Gardens, FL 33418 U.S.		Mailing Address 1501 Presidential Suite 16 West Palm Beach, FL 33401	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0381538		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent Kahle, Craig U. 1501 Presidential Way, Suite 16 West Palm Beach, FL 33410		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!! FEE IS \$150.00**

After MAY 1, 2001, Fee will be \$550.00

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President NAME Rassmann, Jurgen STREET ADDRESS 207 Club Dr. CITY-ST-ZIP Palm Beach Gardens, FL 33418	☐ Delete	TITLE	☐ Change ☐ Addition
TITLE	☐ Delete	NAME	☐ Change ☐ Addition
STREET ADDRESS	☐ Delete	STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	☐ Delete	CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	☐ Delete	NAME	☐ Change ☐ Addition
STREET ADDRESS	☐ Delete	STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	☐ Delete	CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	☐ Delete	NAME	☐ Change ☐ Addition
STREET ADDRESS	☐ Delete	STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	☐ Delete	CITY-ST-ZIP	☐ Change ☐ Addition

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 Block 12 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

April 26, 2001

Date

(561) 689-1220

Daytime Phone #

CR2E034 (11/00)