

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2004 8:00 am
Secretary of State

09-09-2004 90010 006 ***163.75

DOCUMENT # P93000070211

1. Entity Name
A-1 SUNRISE CONSTRUCTION COMPANY



Principal Place of Business
**21250 SW 344TH STREET
HOMESTEAD, FL 33034**

Mailing Address
**21250 SW 344TH STREET
HOMESTEAD, FL 33034**

2. Principal Place of Business
19360 SW 344TH STREET

3. Mailing Address
19360 SW 344TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07142004

Chg-P

CR2E034 (10/03)

City & State
HOMESTEAD, FL

City & State
HOMESTEAD, FL

4. FEI Number
65-0442600

Applied For
Not Applicable

Zip
33034

Country
DADE

Zip
33034

Country
DADE

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

6. Name and Address of Current Registered Agent

**POZO, DAUCE
21250 SW 344TH STREET
HOMESTEAD, FL 33034**

7. Name and Address of New Registered Agent

Name
DAUCE POZO

Street Address (P.O. Box Number is Not Acceptable)

19360 SW 344TH STREET

City
HOMESTEAD

FL

Zip Code
33034

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 obligations of registered agent.

SIGNATURE

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
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☒ **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
POZO, DAUCE
21250 SW 344TH STREET
HOMESTEAD, FL 33034** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
POZO, ANTINOGENO
35301 SOUTHWEST 213 AVENUE
HOMESTEAD, FL 33034** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
POZO, DAUCE
21250 SW 344TH STREET
HOMESTEAD, FL 33034** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
POZO, DAUCE
21250 SW 344TH STREET
HOMESTEAD, FL 33034** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
POZO, DAUCE
19360 SW 344TH STREET
HOMESTEAD, FL 33034** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
POZO, DAUCE
19360 SW 344TH STREET
HOMESTEAD, FL 33034** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
POZO, DAUCE
19360 SW 344TH STREET
HOMESTEAD, FL 33034** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 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

9/6/04 (786)412-2681
Date Daytime Phone #