FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

P93000073100 (8)

DOCUMENT #
1. Corporation Name
SUNNY TOO, INC.



Principal Place	of Business	Mailing Address	Mailing Address							
1902 TIGERTAIL BLVD Dania Fl 33004		MIAMI FL 33137								
		US				3. Date Incorporated or Qualified 10/20/1993	3a. Date 05	of Las /10/1		
Principal Place of Business Total		2a. Mailing Address	2a. Mailing Address 26			4. FEI Number Applied For Not Applied For Not Applied For			Applied For Not Applicable	
Suite, Apt. #, etc.		······	Suite, Apt. #, etc.			5 Certificate of Status Desired \$8.75 Additional				
22		27							e Required	
Crty & State		City & State	h 1			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
23 Zip	Country	[28] Zio	Zip Country				*********		ded to Fees s 199.032,	
24	haman haman haman		30	one one		Florida Statutes Yes No			700.002,	
	9. Name and Address of Cur	rent Registered Agent		— r-		10. Name and Address of New Ro	gistered A	gent		
				B1	Name					
	CE M KASEN PA NCE DE LEON BLVD		\	82	Street Addre	ldress (P.O. Box Number is Not Acceptable)				
SUITE 64			Ē	83						
CORAL (SABLES FL 33145		1	84	City			85	Zip Code	
			_,,,].		ation submits this statement for the purp	FL	بلبل		
familiär with SIGNATURE	ed agent, or both, in the State of Fl n, and accept the obligations of, Si signature, typical or pented name of registrical a.	ection €07.0505, Florida Stat	norized by the co tutes. (NOTE: Registered A			d of directors. I hereby accept the appo	intment as	egiste	red agent. I am	
12.		AND DIRECTORS	1 3.			ADDITIONS/CHANGES TO OFFI		DIREC	TORS IN 12	
TITLE	DPST	DELFTE	1, 1 703	ιĒ) Chan	ge 🔲 Addition	
NAME	MCLEAN, SUNNY		1.2 NAN	ME						
STREET ADDRESS	3800 NE SECOND AVE		1.3 STR	EET A	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33137	F DELEXE	1.4 CITY		(- ZIP			Chan	a	
TITLE NAME	D DELETE MULLER, CHRIS			2 1 TOLE 2 2 NAME			L) Chan	ge	
STREET ADDRESS	6301 SW SHORE BLVD #	1206			ADDRESS					
CITY-ST-ZIP	TAMPA FL 33616		2.4 CIT							
TITLE		DELETE	3. 1 T/T				Ē] Chan	ge 🔲 Addition	
NAME			3.2 NAM	V.E						
STREET ADDRESS			3.3 S1F	REET.	ADDRESS					
CITY-ST-ZIP		F Deleve	3.4 CIT		I - Z (P			1.0		
TITLE		☐ DELETE	4. 1 111 4.2 NAN				L.] Chan	ge Addition	
NAME STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			4.3 STN		Į.					
TITLE		DELETE	5.1 711				Ľ] Chan	ge 🔲 Addition	
NAME			5.2 NAM	ME						
STREET ADDRESS			5.3 \$18	REE F A	ADDRESS					
CITY-ST-ZIP			5.4 001	Y-S1	1 - ZIP					
TITLE		DELETE	6. 1 TIT] Chan	ge 🔲 Addition	
NAME			6.2 NAN							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP	certify that the information supplies	od with this filing is voluntarily	furnished and d			or the exemption stated in Section 119.	77(31/k) Flor	ida St	atutes I further	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and doos not qualify for the exemption stated in Section 119.07(3)(k). 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 direction 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 12 or Block 13 for language an attachment with an address.

SIGNATURE:

GNAT HE AND THES OR PARTIES NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 (305) 573-5943

Daytime Prone #

3R2E034 (12/95)