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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400004640 (6)

FILED Apr 02 1998 8:00am Secretary of State

SUNRISE INN & APTS, INC. Principal Place of Business Mailing Address 4041 N. OÇEAN BLVD. 4041 N. OCEAN BLVD. FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/10/1994 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0466712 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Zip Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 POPRAWSKI, MARIA Name 4041 N. OCEAN BLVD. Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33308 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) CR2E034 (10/97) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE POPRAWSKI, MARIA NAME 1.2 NAME 3821 N. OCEAN BLVD. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33308 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE POPRAWSKI, KRZYSTOF NAME 2.2 NAME 3821 N. OCEAN BLVD. STREET ADDRESS 2.3 STREFT ADDRESS FT. LAUDERDALE FL 33308 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition TITLE Change 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change ■ Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not rurally for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter for an attachment with an address.

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3/05/0