FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 FLORIDA DEPARTMENT OF STATE The state of the s CORPORATION Sandra B. Mortham 🏢 ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 97 JUN - 9 AM 8: 35 DOCUMENT # P940000 2 2 492. (0) SECRETARY OF STATE TALLAHASSEE FLORIDA Sunflower Properties, Inc. Principal Place of Business 4424 Northeast First Avenue P.O. BOX 370421 Miami, FL 33137 Miami, FL 33137 3. Date Incorporated or Qualified 3a. Date of Last Report 2. Principal Place of Business Applied For 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent Eric Keil 401 Ocean Drive 82 Minmi Beach, Fl 33139 83 84 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, Seguin 607.0505, Florida Statutes. SIGNATURE (NOTE: Rog-stered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 13. Kenned E. Marker 1710 Southwest 89 Place Miami, Fl 33165 1 1 TITLE Change Addition TITLE NAME 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS 1.4 CHY-ST-ZIP CITY-ST-ZIP 2.1 TITLE TITLE 2.2 NAME NAME 401 Ocean Dive wit 801 Miami Beach, Fl 33139 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-SY-ZIP TITLE 3.1.7(TLE 400002208794----06/11/97--01070--006 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS \*\*\*\*165.00 \*\*\*\*165.00 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition Change TITI F 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE Change Addition NAME 5.2 NAME STREET ADDRE 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME

14. I do 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 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 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 12 or Block 13 if changed, or on an attachment with an address. Kennett C. Marker 0/6/97 (305)

ABECTOR DELCO 1/97 (305) NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

63 STREET ADDRESS 64 CITY - ST - ZIP

STREET ADDRESS