## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P94000024376 (3)

| SUN BA   | AY, INC.   |              |   |  |           |                                       |   |  |
|--|--|--------------|---|--|-----------|---------------------------------------|---|--|
| Principal Place o  | of Business  | Má           | iling Address                           |  |           |                                       | - I JURNIURI NIC IRIAN RIANI BRIN RENIN RENIN PRIN FIRE BRAN HAN ARANA MINI ARAN  |  |
| 948 BAY DRIVE AVE #98<br>MIAMI BEACH FL 33144-2033<br>US |  |              | 780 NW 42 AVE<br>#621<br>Miami FL 33126 |  |           |                                       | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  03/30/1994   |  |
| 2. Principal Plac  | ce of Business   | 2a.          | Mailing Address                         |  |           |                                       | 4. FEI Number Applied For   |  |
| 21   |  | 26           |   |  |           |                                       | 65-0490395 Not Applicable   |  |
| Suite, Apt. #, etc.                                      |  | 27           | Suite, Apt. #, etc                      |  |           |                                       | Certificate of Status Desired     Sa.75 Additional     Fee Required   |  |
| City & State   |  | 28           | City & State                            |  |           |                                       | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees  |  |
| Zip<br>24  | Country 25   | 29           | Zip                                     | 30   | ntry      |                                       | 8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. Yes No  |  |
|  | 9. Name and Address of Curr  | ent Regis    | lered Agent                             |  | <b>B1</b> |                                       | 10. Name and Address of New Registered Agent  |  |
| 11. Pursuant to office or reg agent, 1 am                | the provisions of Sections 607.0 istered agent, or both, in the Statement with, and accept the ob- | ligations of | , Section 607.0505, I                   | utes, the abs<br>s authorized<br>Florida State | utes      | S.                                    | FL 85 Zip Code reporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered |  |
| <del></del>  | gratore, typed or ported move of regulation  |              |   |  | Age       | ont signature requir                  | uired when reinstating) DATE  |  |
| 12.  | OFFICERS /   | MAD DIREC    | DELETE                                  | 13.  |           |                                       | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  |  |
| NAME<br>STREET ADDRESS                                   | BENAUD, DANIEL<br>948 BAY DRIVE AVE., #98  |              | 1.2 NA                                  | 1.2 NAME<br>1.3 STREET ADDRESS                 |           | C pignite C vontroil                  |   |  |
| CITY-ST-ZIP  | MIAMI BEACH FL 33144-2093  |              |   | 1.4 CITY - ST - ZIP                            |           |                                       |   |  |
| TITLE  |  |              |   | 2 1 TITLE                                      |           | Change Addition                       |   |  |
| NAME<br>DIOSSI ADDOSSO                                   | BENAUDE, ANDREE<br>948 BAY DRIVE AVE., #9  |              |   | 22 NA  |           | +DDDED0                               |   |  |
| STREET ADDRESS   | MIAMI BEACH FL 33144-2   |              |   | 1  |           | ADDRESS                               |   |  |
| CITY-ST-ZIP<br>TITLE                                     |  |              |   | 2 4 CITY-ST-ZIP<br>3 1 TITLE                   |           | Change Addition                       |   |  |
| NAME   | ···  |              |   |  | 3.2 NAME  |                                       | had wonge say ( days)   |  |
| STREET ADDRESS   |  |              |   |  |           | ADDRESS                               |   |  |
| CITY-ST-ZIP  |  |              |   | B C  |           | ST-ZIP                                |   |  |
| TITLE  |  |              | DELETE                                  | 4111   |           | · · · · · · · · · · · · · · · · · · · | Change Addition   |  |
| NAME   |  |              | _                                       | 4.2 N/   |           | ł                                     | - · -   |  |

14. Thereby 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

1 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is fully an address.

1 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is fully an address. DANIEL BENAUD - PRESIDENT

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

64 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE: X

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREE! ADDRESS

CITY-ST-ZIP

NAME

TITLE

NAME

DELETE

DELETE

Change

Change

Addition

Addition

**FILED** 

Mar 10 1998 8:00am

Secretary of State