

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

#5381

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Candace B. McMan
Secretary of State
Tallahassee, Florida 32399

MAY -1 PM 1:49

DOCUMENT # P94000043696 (1)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUNRISE TOWERS CORP.

Principal Place of Business
240 S. PINEAPPLE AVE.
10TH FLOOR
SARASOTA FL 34235

Principal Address
P.O. BOX 49948
SARASOTA FL 34230-6948

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 06/10/1994		3a. Date of Last Report	
4. FEI Number 65-0498650		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199(2)(c), Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent WALIA, HARRY S 639 CORNWELL ON THE GULF VENICE FL 34285		10. Name and Address of New Registered Agent 81 Name HANAN, Lewis 82 Street Address (P.O. Box Number is Not Acceptable) 1830 S. Tuttle Avenue 83 84 City Sarasota 85 Zip Code FL 34239	
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11. Pursuant to the provisions of Sections 607.05(2) 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 607.05(2), Florida Statutes.

SIGNATURE: Lewis Hanan 4/27/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME BAND, DAVID S	12.2 STREET ADDRESS 240 S. PINEAPPLE AVE., 10TH FLOOR 12.3 CITY, ST. ZIP SARASOTA FL 34235	13.1 NAME DPT	13.2 STREET ADDRESS 13.3 CITY, ST. ZIP
12.4 NAME WALIA, HARRY S	12.5 STREET ADDRESS 639 CORNWELL ON THE GULF 12.6 CITY, ST. ZIP VENICE FL 34285	13.4 NAME DS	13.5 STREET ADDRESS 13.6 CITY, ST. ZIP HANAN, Lewis 1830 S. Tuttle Avenue Sarasota, FL 34239
12.7 NAME DEPORIS, GENE JR.	12.8 STREET ADDRESS 6750 GULF OF MEXICO DR., STE. 158 12.9 CITY, ST. ZIP LONGBOAT FL 34228	13.7 NAME D	13.8 STREET ADDRESS 13.9 CITY, ST. ZIP 1750 S. Oval Drive Sarasota, FL 34239
12.10 NAME	12.11 STREET ADDRESS	13.10 NAME	13.11 STREET ADDRESS
12.12 NAME	12.13 STREET ADDRESS	13.12 NAME	13.13 STREET ADDRESS
12.14 NAME	12.15 STREET ADDRESS	13.14 NAME	13.15 STREET ADDRESS
12.16 NAME	12.17 STREET ADDRESS	13.16 NAME	13.17 STREET ADDRESS
12.18 NAME	12.19 STREET ADDRESS	13.18 NAME	13.19 STREET ADDRESS
12.20 NAME	12.21 STREET ADDRESS	13.20 NAME	13.21 STREET ADDRESS

14. I, the undersigned, certify that the information supplied with this filing is substantially furnished and does not qualify for the exemption stated in Section 199(2)(c), Florida Statutes. I further certify that the information is true and correct, 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 of this report, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Lewis Hanan, Secretary

4/27/95 813/366-6660