FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000046520 (0)**

1. Corporation Name

SUNFLOWER WASHINGTON, INC.

Principal Place of Business	Mailing Address
~~3750 NW 87TH AVE~~ ~~SUITE 680~~ MIAMI FL 33178	~~3750 NW 87TH AVE~~ ~~SUITE 680~~ MIAMI FL 33178

3. Date Incorporated or Qualified: 06/21/1994
3a. Date of Last Report: 04/11/1995

2. Principal Place of Business
21: 8750 N.W. 36 STREET
Suite, Apt. #, etc.
22: SUITE 200
City & State
23: MIAMI FLORIDA
Zip 24: 33178 Country 25: USA

2a. Mailing Address
26: 8750 N.W. 36 STREET
Suite, Apt. #, etc.
27: SUITE 200
City & State
28: MIAMI FLORIDA
Zip 29: 33178 Country 30: USA

4. FEI Number: 65-0500090 ☐ 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 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DAVIDSON, FERGUS M JR
~~3750 NW 87TH AVE~~
~~SUITE 680~~
MIAMI FL 33178

10. Name and Address of New Registered Agent

81 Name: DAVIDSON, FERGUS M JR.
82 Street Address (P.O. Box Number is Not Acceptable): 8750 N.W. 36 STREET
83: SUITE 200
84 City: MIAMI FL 85 Zip Code: 33178

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 _____ MARCH 25, 1996
Signature, typed or printed name of registered agent, and title if applicable (CR2E031 Registered Agent Signature required on this report) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	D	☐ Change ☐ Addition
NAME	DAVIDSON, FERGUS M JR		1.2 NAME	DAVIDSON, FERGUS M. JR.	
STREET ADDRESS	~~3750 NW 87TH AVE~~		1.3 STREET ADDRESS	8750 N.W. 36 STREET SUITE 200	
CITY-ST-ZIP	MIAMI FL 33178		1.4 CITY-ST-ZIP	MIAMI, FLORIDA 33178	
TITLE	D	☐ DELETE	2.1 TITLE	D	☐ Change ☐ Addition
NAME	DAVIDSON, FERGUS M SR		2.2 NAME	DAVIDSON, FERGUS M.SR.	
STREET ADDRESS	~~3750 NW 87TH AVE~~		2.3 STREET ADDRESS	8750 N.W . 36 STREET SUITE 200	
CITY-ST-ZIP	MIAMI FL 33178		2.4 CITY-ST-ZIP	MIAMI, FLORIDA 33178	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: _____ MARCH 25, 1996 (305) 592-5999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #