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

**PROFIT** CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000063889 (7)

SUNBUSTERS USA, INC.

## **FILED** Feb 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					- I LODINADE HE IDIN BIDIL DUNA DUNE	BOIN ABING BINDS INDE		PO POLI UBAL	
7423 NW 54TH ST 7423 NW 54TH ST MIAMI FL 33166 MIAMI FL 33166									
US US				DO NOT WRITE IN			THIS SPACE		
					3. Date Incorporated or Qualified 08/30/1994	l			
2. Principal P	lace of Business	2a. Mailing Address		*	4. FEI Number		Ap	plied For	
21 26					65-0516308			Applicable	
Suite, Apt. #, etc.					5. Certificate of Status Desired		3.75 A Fee Re	dditional	
27					& Floring Connection Figure 1	····		·	
23 28					Election Campaign Financing Trust Fund Contribution		Added to	May Be	
Zip	Country Zip			ntry	8. This corporation owes or has				
24	25 29 30			Personal Property Tax due June 30. Yes No					
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New F	tegistered Agent	<u>t</u>		
MAJOR, ALEX F				81 Name C	JARY RACKERA	R. ES	â.		
- 7423 NW 54TH ST				82 Street Add	ress (P.O. Box Number is Not Accept		<del></del>	,	
MIAMI FL 36166				83	175 SUNGET DR.	2017-	600	<del>/</del>	
				0.5			'	<u></u>	
			[	84 City <3	UTH MIAMI	E1 85	Zip C	ode	
11. Pursuant	to the provisions of Sections 607.050	22 and 607 1508. Florida Statu	es the at		poration submits this statement for the	purpose of char			
office or regimered agent, or both in the State of Florida. Such change was authorized agent. I am amittar with, any accretifing obligations of Section 607.0505, Florida State					tion's board of directors. I hereby acc	ept the appointm	ent as I	registered	
· -	maintar with, and accept in only	. 1/	ures.		Moule	<b>3</b> ₩			
SIGNATURE Signature type of or production of repetered apent and the drapple abdo (NOTE)				Agent signature requi	red when reinstating)	DATE	-0		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF				
TITLE	PD	DELETE	1,1 18	LE			hange	Addition	
NAME	MAJOR, ALEX F		1.2 NA	ME					
STREET ADDRESS	13953 SW 66TH STREET, #0	602	1.3 ST	REET ADDRESS				ļ	
CITY-ST-ZIP	MIAMI FL 33183	DELETÉ		IY-SI-ZIP			Change	☐ Addition	
TITLE	C.F.OT WAT		2.1 10	·			Hariyo	☐ Modition	
NAME	LOUIS J. MAJ 400 S. POINTE P MITTHE BEASEL, !	1 tt-2104	2.2 NA			274			
STREET ADDRESS	400 S. Parkie 1	5 22.36		REET ADDRESS				ŀ	
CITY-ST-ZIP TITLE	MILMI ROASH	1- 3515 T DELETE	3.1 TII	TY-ST-ZIP	·		hange	Addition	
NAME	SECRETARY.		32 NA				•	_	
STREET ADDRESS	HELEN MAJOR	T #602		REET ADDRESS					
CITY-ST-ZIP	13953 SW 666	22187	3 4. C	TY-ST-ZIP				ŀ	
TITLE		DELETE	4.1 TO			c	hange	Addition	
NAME			4.2 N	AME					
STREET ADDRESS			4.3 ST	REET ADORESS					
CITY-ST-ZIP			4.4 CI	IY-ST-ZIP					
TITLE		☐ DELETE	5.1 7()	'LE			Change	☐ Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADDRESS					
CITY-ST-ZIP		1 - 1	_	TY - ST - ZIP		<del></del>	<del></del>		
TITLE		☐ DELETE	6.1 T(1				Change	Addition	
NAME			6.2 NA						
STREET ADDRESS				REET ADDRESS					
CITY - ST - ZIP	I		6.4 CI	TY-ST-ZIP					

14. I 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 supplimental 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 attachiment with an address.

SIGNATURE: