2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000077369

FILED
May 09, 2000 8:00 am
Secretary of State
05-09-2000 90136 027 ***150.00

B0088745

DO NOT WRITE IN THIS SPACE

1. Entity Name: SUNSET SPORT CORP.

Principal Place of Business: 101 DUVAL ST, KEY WEST, FL 33040

Mailing Address: C/O S. KRAFT P.A., 10101 E W. Sample Rd., CORAL SPRINGS, FL 33065

Principal Place of Business — Suite, Apt #, etc.:

3. Mailing Address — Suite, Apt. #, etc.:

City & State:

City & State:

Zip:

Country:

Zip:

Country:

4. FEI Number: 65-0529377 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name: NEIL HAMUY

Street Address (P.O. Box Number is Not Acceptable): C/O S. KRAFT P.A., 10101-C W. SAMPLE RD.

City: CORAL SPRINGS, FL — FL — Zip Code: 33065

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Neil Hamuy — 4/25/00

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) — DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILING FEE: $150.00 — After MAY 1, 2000 Fee will be $500.00 — Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
PSD SHOEFF, NISSIM BEN ADDRESS ST ZIP ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
V HAMUY NEIL C/O 10101-C W. SAMPLE RD. CORAL SPRINGS, FL 33065 ADDRESS ST-ZIP ☐ Delete	TITLE → P.S.D.V. NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☐ Addition
ADDRESS ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
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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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Neil Hamuy (Neil Hamuy - Pres) 4/25/00 954-753-1766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #