**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 16 PM 3:05

DOCUMENT # P94000079414 (6)

1. Corporate Name
SUNRISE COMPUTERS, INC.

Principal Place of Business
1547 NW 79TH AVE
MIAMI FL 33126

Mailing Address
1547 NW 79TH AVE
MIAMI FL 33126

Do Not Write In This Space

3. Date Incorporated (or Qualified) 10/28/1994
3a. Date of Last Report

2. Principal Place of Business 21
2a. Mailing Address 26
Suite, Apt. #, etc. 22
Suite, Apt. #, etc. 27
City & State 23
City & State 28
Zip 24
Country 25
Zip 29
Country 30

4. FEI Number 65-0529799
Applied For / Not Applied For

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**

MACDANIEL, JOHN M
TWO S BISCAYNE BLVD
ONE BISCAYNE TOWER SUITE 2975
MIAMI FL 33131

**10. Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL
85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 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
Signature of Officer or Director | Signature of New Registered Agent, if Changing | DATE

**12. OFFICERS AND DIRECTORS**

| | |
|---|---|
| TITLE | D |
| NAME | DE JESUS MARTINS, FERNANDO |
| STREET ADDRESS | RUA DAS MISSOES 987 CENTRO APARTMENTO 402 |
| CITY ST ZIP | FOZ DO IGUACU PR BRAZIL |
| TITLE | D |
| NAME | DE JESUS MARTINS, SOLANGE |
| STREET ADDRESS | RUA CARAPURI 133 AUTO DA LAPA |
| CITY ST ZIP | SAO PABLO SP BRAZIL |
| TITLE | D |
| NAME | GIO, CHANG LI |
| STREET ADDRESS | LAI LAI SHOPPING CENTER NUMERO 102 |
| CITY ST ZIP | CIUDAD DEL ESTE PARAGUAY |
| TITLE | D |
| NAME | BASSO, WILSON A |
| STREET ADDRESS | 9551 FOUNTAINEBLEAU BLVD #605 |
| CITY ST ZIP | MIAMI FL 33172 |
| TITLE | D |
| NAME | LI, WEIHAO |
| STREET ADDRESS | 9551 FOUNTAINEBLEAU BLVD #605 |
| CITY ST ZIP | MIAMI FL 33172 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY ST ZIP | |

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995**

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

41 TITLE P ☑ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

51 TITLE T ☑ Change ☐ Addition
52 NAME LEE, WEI-HAO
53 STREET ADDRESS 9521 FONTAINEBLEAU BLVD #120
54 CITY ST ZIP MIAMI, FL 33172

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I hereby certify that the information supplied with this report is substantially true and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further, I certify that the information indicated on this annual 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: x
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OF DIRECTOR OR OFFICER

02/13/95 (305) 592-3733
Date Daytime Phone Number

0123077 CP