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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000012584 (5)

SUNRISE AUTO WORLD, INC.

Mailing Address Principal Place of Business 241 RIDGEWOOD AVE. P.O. BOX 2040 DAYTONA BEACH FL 32115-2040 HOLY HILL FL 32168 3. Date Incorporated or Qualified 3a. Date of Last Report 02/13/1995 06/12/1996 4. FEI Number 2. Principal Place of Business 2s. Mailing Address Applied For 59-3297730 Not Applicable 26 21 Suite, Apt. #, ctc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country Zιμ 8. This corporation has liability for intangible tax under s. 199.032, Yes 25 30 Florida Statutes 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALSH, J. DAVID 432 S BEACH ST Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32114 83 84 City Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature type and prodecinario of registered agent and tick if applicable (NOTE: Registered Agent signature required when reinstating) (96/6) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD Addition DELETE ☐ Change 1.1 TITLE TITLE HIGGINBOTHAM, DENNIS D 1.2 NAME NAME R2E034 104 RIVERSIDE DR 1.3 STREET ADDRESS STREET ADDRESS NEW SMYRNA BEACH FL 32168 CITY ST ZIP 1.4 CITY-ST-ZIP VD DELETE Change Addition TITLE 21 TITLE HILL LARRY 2.2 NAME 104 RIVERSIDE DR 2.3 STREET ADDRESS STREET ADDRESS NEW SMYRNA BEACH FL 32168 CITY - ST 2. 4 CITY - ST - ZIF DELETE ☐ Change ■ Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CiTY-ST-ZiP CITY SI DELETE ☐ Change Addition HILE 4 1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY - ST - ZIP DELETE Addition 5.1 TITLE I I Change THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition THLE 6.1 THILE NAVE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - \$1 - ZIP

14. I do 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 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 in fusite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if changer, or on an att

CITY - ST - Ziti

IRE AND TWEE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/-/3-77 904 Date Date

FILED

Jan 28 1997 8:00am

Secretary of State

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