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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000015057 (9)

1. Corporation Name
SUNBURST ENTERPRISES LTD., INC.

J. KASSKIES 487-6000 MAY **1**



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Principal Place of Business Mailing Address													
1431 W RIVER DR 1431 W RIVER DR MARGATE FL 33063							1						
MARGATE FL	suo:	militarie (L. 9000)			3.	Date Incorporated or Qualified 02/16/1995	3a. Date of Last Report						
		Т.	Malaca Address				+4.	FEI Number		Ī	Αp	plied For	
Principal Piace of Business			2a. Mailing Address 26				1	6505681	<u> </u>		No	t Applicable	
Suite Act & alc			Suite, Apt. #, etc.				5	Certificate of Status Desired	N/			Additional	
Suite, Apt. #, etc.			27				J. Commercial 1					Required	
City & State			Orty & State				6. Election Campaign Financing \$5.00 Ma						
3		28		т —			-	Trust Fund Contribution This corporation has liability for	intannible t				
Ζφ	Country	ļ	Zip	Cour	itry		8.	Florida Statutes	No.				
1	25	29	atorod Agent	[30]			10	Name and Address of New F	Registered	Agent			
!	9. Name and Address of Currer	it nego	Steled When		81	Name							
5.01 EV	THOUSE D						/E	O. Box Number is Not Accepta	ble)				
	THOMAS R				82	Street Addre	ess (i	O. BOX HOMOGINE HERE ENGINEER					
	river dr 'e fl 33063				83	[-							
MARGAI	E LF 22002				84	City				85	Zip	Code	
	the provisions of Sections 607.050					1			FI	- l	L <u>.</u>		
SIGNATURE	granike, types or providinanie otre inčesti agra OFFICERS At	ND DIRE	CIORS	13.		et signature require		ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRE	CTOF	RS IN 12	
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NAME CZECEZ ADODECC	1431 W RIVER DR			138	TREE	1 ADDRESS							
STREET ADDRESS CITY-S1-ZIP	MARGATE FL 33063			140)[Y-	ST - ZIP				[] Ch	2020	☐ Addit.on	
THLE	D	**	[]] DELETE	2.1	TITLE						ange	L. Addition	
NAME	Pasley, Jeanette F			221		1							
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CITY - ST - ZIP	certify that the information supplie	ad witt	strie filmo is voluntarily fi	umished an	id d	loes not qualif	v for t	he exemption stated in Section 1	i 19.07(3)(k)	Florida	a Stati	ites. I furtne	

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)(k). 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 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 certify that the information indicated on this annual report 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 attaching of with this plantage.

SIGNATURE:

ORGANITHE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-96 954-978-665

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