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PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000085077

SUNRISE PROPERTIES INTERNATIONAL VIII, CORP.

FILED May 28 1997 8:00am Secretary of State

Principal Place of Business Mailing Address						48818 48419 BILLY BBING BBING BENEFER
13499 Biscayne Blvd. 13499 Biscayne Blvd. No. Miami, FL 33181 No. Miami, FL 33181						
		, , , , , , , , , , , , , , , , , , ,		•		Date of Last Report
6 Principal Pl	nos of Business	2a. Mailing Address			11/6/95 4. EEI Number	X Applied For
2. Principal Place of Business 2a. Mailing Address 25					65-0662672.	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						SR 75 Additional
27					5. Certificate of Status Desired	Fee Required
City & State)	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation has liability for intan	
24	25	[29]]3/	<u> </u>		Florida Statutes Ye 10. Name and Address of New Register	s No
	9. Name and Address of Curre	allt Dedistaten våetit	811	Name	10. Natio and Addison of Note in gion	
Manuel M. Arvesu, P.A.						
	E. 2nd Street	•	82	Street Add	ress (P.O. Box Number is Not Acceptable)	
	3700	<u>~</u> *	63			
	FL 2313/1			0.5		85 Zip Code
·		1	84	i '		FL
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statutes	the above	e-named cor	poration submits this statement for the purportion's board of directors. I hereby accept the	ose of changing its registered
office or re	to the provisions of Sections 607.05 epistered agent, or both, in the State in familiar with and accept the obli	le of Florida. Such change was au igations of, Se <u>ction 607-95</u> 05, Flori	triorizeo by da Statutez	/ ine corpora }.	mon's board of directors. I hereby accept the	e appointment as registered
SIGNATURE			M	anuel M	[. Arvesn 4 20 20 20 20 20 20 20	۱)
0.0	Signature, typed or printed name of registered a	igent and title if applicable. (NOTE:	Regulered Age	eni signatura requ	ired when reinstating) D	ATE
12.		ND DIRECTORS	13. 1,1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE NAME	P		1.2 NAME			
STREET ADDRESS	Lopez, Ali	m3 3	1.3 STREET	ANDRESS		
CITY-ST-ZIP	13499 Biscayne	B1VQ.	1.4 City-S			
TITLE	S MIAMIL FL	☐ DELETE	2.1 TITLE	,		Change Addition
NAME	Vives, Mauricio		2.2 NAME			
STREET ADDRESS	13499 Biscayne Blvd.		2.3 STREET	ADDRESS		
CITY-ST-ZW	No. Miami, FL 33181			ST-ZIP		
TITLE		DELETE	3.1 TITLE		4	Change
NAME			3.2 NAME		,	
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP		L DELETE	3.4, CITY - 1	ST-ZIP		Change Addition
TITLE		L.J OCCCIE	4.1 TITLE 4.2 NAME			the world the control
NAME PROCET ADDRESS				T ADDRESS		
STREET ADDRESS CITY-ST-ZIP			4.4 CITY - S	1		
TITLE		☐ DELETE	5.1 TITLE	<u> </u>		Change / Addition
NAME			5.2 NAME			15/2 /
STREET ADDRESS	1		S.3 STREET	T ADDRESS		111/12/81
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		X/ ((// X
TITLE		☐ DELETÉ	6.1 TITLE			Change Addition
NAME	Ĭ		6.2 NAME		900002203 -06/06/9701028-	849
STREET ADDRESS			6.3 STREE	T ADDRESS	-06/06/3701028-	001
CITY-ST-ZIP		11-11-11-11-11-11-11-11-11-11-11-11-11-	64 CITY -	analian state	***2145.00	further certify that the
14. I do here information	on indicated on this annual report of	or supplemental annual report is the	no the exe	curate and the	ed in Section 119.07(3)(i), Florida Statutes. I at my signature shall have the same legal ef ort as required by Chapter 607, Florida Statu	fect as if made under oath; that
l am an d appears	officer or director of the corporation in Block 12 or Block 13 if changed	or the receivet or trustee empower, or on an attachment with an add	red to exeress.	cule this rep	ort as required by Chapter 607, Florida Statt	шея; апо шасту пате