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# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 AUG 13 AM 11:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # P96000000565

1. Entity Name  
E & S SUNRISE PROPERTY, INC.

Principal Place of Business  
C/O ALL QUALITY PROPERTY  
3328 NE 11TH AVE  
FORT LAUDERDALE, FL 33334-2712

Mailing Address  
C/O ALL QUALITY PROPERTY  
3328 NE 11TH AVE  
FORT LAUDERDALE, FL 33334-2712



07152004 No Chg-P CR2E034 (10/03)

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**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0648989

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GATES, MICHAEL L  
2435 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33020

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME KUNZ, EDWIN  
STREET ADDRESS 3328 NE 11TH AVE  
CITY-ST-ZIP FORT LAUDERDALE, FL 333342712

TITLE ST  
NAME KUNZ, SIEGLINDE  
STREET ADDRESS 3328 NE 11TH AVE  
CITY-ST-ZIP FORT LAUDERDALE, FL 333342712

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

500040360215  
08/20/04--01042--001 \*\*150.00

**DO NOT WRITE IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edwin Kunz* EDWIN KUNZ President 08-09-04 816-265-3801  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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**All Quality Properties, Inc**  
3328 NE 11<sup>th</sup> Avenue  
Oakland Park, Florida 33334  
954-564-4446 954-564-1292 Fax

July 23, 2004

Ms. Barbara Mitchell  
Document Specialist  
Florida Department of State  
Divisions of Corporations  
POB 6327  
Tallahassee, Florida 32314

Re: Reference Number P96000000565  
E & S Sunrise Property Inc.

Dear Ms. Mitchell:

Please find attached annual report/uniform business report and filing fee.

We respectfully request that the late fee be waived as we never received the annual report notice.

Thank you.

Very truly yours,

  
Grace Antonello

GA/wab

Cc: Kunz  
file