


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

P6192

PROFIT CORPORATION ANNUAL REPORT 1999-2000	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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03-11-1999 90228 002 ED 50.00

DOCUMENT # P96000018077

1. Corporation Name
SUNRISE AUTO REPAIR, INC.

00 AUG 30 PM 2: 15

SECRETARY

Principal Place of Business
2531 N.W. 87TH LANE
SUNRISE FL 33322

Mailing Address
2531 N.W. 87TH LANE
SUNRISE FL 33322

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/27/1996	
21	Suite, Apt. # etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0662805	Applied For: Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SCOTT-WALTERS, LORETTA 2531 N.W. 87TH LANE SUNRISE FL 33322		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 607.0502 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P SCOTT-WALTERS, LORETTA 2531 N.W. 87TH LANE SUNRISE FL	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY-STATE-ZIP		14 CITY-STATE-ZIP	
TITLE	D SCOTT, RANDOLPH 2531 N.W. 87TH LANE SUNRISE FL 33322	21 TITLE	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-STATE-ZIP		24 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-STATE-ZIP		34 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-STATE-ZIP		44 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-STATE-ZIP		54 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-STATE-ZIP		64 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

Loretta Scott-Walters
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 LORETTA SCOTT-WALTERS PRES.

2/4/99 8/24/2000
 Date Date

02E034 (1/98)

SP

18242

Sunrise Auto Repair, Inc.
2531 N.W. 87th Lane • Sunrise, FL 3322-2834

954-524-6758

August 8, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahassee, Florida 32314

RE: 2000 UBR for Sunrise Auto Repair, Inc.
Document #P96000018077
EIN #: 65-0662805

In accordance with my conversation with your department, enclosed is a re-signed copy of our 1999 Annual Report with a check for \$150.00 for our 2000 Uniform Business Report.

In reviewing our books and records for the first half of 2000, our accountant noticed there was no check payable to the Department of State for our 2000 Uniform Business Report. In searching our files, we have found no such document (nor have we received any follow-up request for payment).

We would appreciate your accepting the enclosed check for \$150.00 as payment in full and checking the records to be sure our correct mailing address is listed in your records so that we receive all future correspondence and can make payments on time.

Thank you for your time and consideration.

Sincerely,



Loretta Scott Walters
President