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 # P96000083543 (4)

SUNBURST INC.

FILED May 07 1997 8:00am Secretary of State



Principal Place of Business 200 CYPRESS DR. KEY BISCAYNE FL 33149		260 CYPR	Mailing Address 260 CYPRESS DR. KEY BISCAYNE FL 33149-1208				Date Incorporated or Qualified				
							10/07/1996	Ja. Dat	C OF East 1	юрон	
2. Principal Place	2a. Mailin	2a. Mailing Address				4, FEI Number ★ Applied For					
21		26								ot Applicable	
Suite, Apt. #, et	IC.	- ├ ─┐	Apt #, etc.				5. Certificate of Status Desired			Additional	
City & State		27 City &	Slale				6 Floring Committee Financia			equired	
23		28					Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country	Zip		Cou	ntry		8. This corporation has liability for i				
24	25	29		30				Yes 🔀			
	. Name and Address of Cui	rent Registered A	\gent				10. Name and Address of New Re-	gistered A	gent		
	ez, eduardo o				81	Name					
	PRESS DR.				82	Street Add	iress (P.O. Box Number is Not Acceptab	le)			
KEY BIS	CAYNE FL 33149										
					В3						
					84	City			85 Zip	Code	
All District And All	a namidalana al Octobre anal	000000000000000000000000000000000000000	0.51.11.01.1				poration submits this statement for the p	FL	<u> </u>		
SIGNATURE Signa 12.	of the control of the	Tagent and blue applica AND BIRECTORS	DELETE	11. Registered 13.		nt signature requ	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12	
NAME				1.2 N/			KUESID EU V	ا حڪياء	Change	Addinori	
STREET ADDRESS						ADDRESS	EDUANDO O. SAN LGO SYPHESS DE KEY BISCAYNG FL	(L	•		
CITY-ST-ZIP				1.4 CI			KEY BISCAYNG FL	ે ઢ	314	9	
TITLE			DELETE	2 1 717					Change	Addition	
NAME				2.2 NA	Mt			•	_ ,		
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NAME				32 NA	ME						
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NAME				4 2 N							
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1			☐ MULLIE	6 1 111				L	Change	Addition	
NAME STREET ADDRESS				6.2 NA							
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP	artifu that the information conv	in a contract of the contract		6.4 CIT	Y-51	-7IP	11. 6. 11. 440 07(0)(1. 6. 11. 0)				

recovering that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. 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 directly of the corporation or the receive or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 12 or Tipok 13 if changed, or on an attachment with an address.