

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 APR 22 AM 9:08

DOCUMENT # P97000013399 (5)

1. Corporation Name

SUNDAYS ON THE BAY, INC.

Principal Place of Business

2450 S.W. 137TH AVE.
SUITE 226
MIAMI FL 33175

Mailing Address

2450 S.W. 137TH AVE.
SUITE 226
MIAMI FL 33175

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/11/1997

4. FEI Number

65-0731688

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 5420 Crandon Blvd.

Suite, Apt. #, etc.

22 802

City & State

23 Key Biscayne, FL

Zip

24 33149

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

RALPHEN LEON, WETTE ESQ.
2450 S.W. 137TH AVE.
SUITE 226
MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name A & P Registered Agent In
82 Street Address (P.O. Box Number is Not Acceptable)
2450 SW 137 Ave, Ste 226
83
84 City Miami FL 85 Zip Code 33175

11. Pursuant to the provisions of Sections 607.0702 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MORE, JOSE
STREET ADDRESS 2450 S.W. 137TH AVE., SUITE 226
CITY-ST-ZIP MIAMI FL 33175

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D, P
1.2 NAME Bencomo, Esteban
1.3 STREET ADDRESS 5420 Crandon Blvd.
1.4 CITY-ST-ZIP Key Biscayne, FL 33175

2.1 TITLE D, VP
2.2 NAME Amaro, Pedro
2.3 STREET ADDRESS 5420 Crandon Blvd.
2.4 CITY-ST-ZIP Key Biscayne, FL 33175

3.1 TITLE D, T
3.2 NAME Reyes, Javier
3.3 STREET ADDRESS 5420 Crandon Blvd.
3.4 CITY-ST-ZIP Key Biscayne, FL 33175

4.1 TITLE D, S
4.2 NAME Pino, Carlos
4.3 STREET ADDRESS 5420 Crandon Blvd.
4.4 CITY-ST-ZIP Key Biscayne, FL 33175

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, for or an attachment with an address.

SIGNATURE: [Signature] Resident 4/15/98 (305) 361-6777

CR2E034 (10/97)