

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000022528 (8)

1. Corporation Name

SUNNY CELEBRITY CORP.



Principal Place of Business

455 NE 210 CIR. TERR. #203
N. MIAMI FL 33179

Mailing Address

455 NE 210 CIR. TERR. #203
N. MIAMI FL 33179

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/12/1997

4. FEI Number

65-0741581

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$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 6125 Westgate Dr.

Suite, Apt. #, etc.

22 # 1222

City & State

23 Orlando FL

Zip

24 32835

Country

2a. Mailing Address

26 6125 Westgate Dr.

Suite, Apt. #, etc.

27 # 1222

City & State

28 Orlando FL

Zip

29 32835

Country

30

9. Name and Address of Current Registered Agent

RODRIGUEZ, ALBA
455 NE 210 CIR. TERR. #203
N. MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name
RODRIGUEZ, ALBA

82 Street Address (P.O. Box Number is Not Acceptable)
6125 Westgate Dr.

83 # 1222

84 City
Orlando

FL

85 Zip Code
32835

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME RODRIGUEZ, ALBA
STREET ADDRESS 455 NE 210 CIR. TERR. #203
CITY-ST-ZIP N. MIAMI FL 33179

☐ DELETE

TITLE D
NAME PARRA, ALICIA
STREET ADDRESS 455 NE 210 CIR. TERR. #203
CITY-ST-ZIP N. MIAMI FL 33179

☐ DELETE

TITLE D
NAME PARRA, MAGALLY
STREET ADDRESS 455 NE 210 CIR. TERR. #203
CITY-ST-ZIP N. MIAMI FL 33179

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME RODRIGUEZ, ALBA
1.3 STREET ADDRESS 6125 Westgate Dr. #1222
1.4 CITY-ST-ZIP Orlando FL 32835

☐ Change

☐ Addition

2.1 TITLE
2.2 NAME PARRA, ALICIA
2.3 STREET ADDRESS 6125 Westgate Dr. #1222
2.4 CITY-ST-ZIP Orlando FL 32835

☐ Change

☐ Addition

3.1 TITLE
3.2 NAME PARRA, MAGALLY
3.3 STREET ADDRESS 6125 Westgate Dr. #1222
3.4 CITY-ST-ZIP Orlando FL 32835

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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, or on an attachment with an address.

SIGNATURE:

[Signature]

9/28/98

407-2923554

CR2E034 (5/98)