

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Feb 20, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000071870**

1. Entity Name

SUN REAL ESTATE OF MIAMI, INC.



Principal Place of Business

2601 NW LEJEUNE ROAD  
MIAMI FL 33142  
US

Mailing Address

2601 NW LEJEUNE ROAD  
MIAMI FL 33142  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number

65-0798267

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FORTES, PEDRO A  
2601 NW LEJEUNE ROAD  
MIAMI FL 33142

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete  
NAME ORMENO, MALONE C  
STREET ADDRESS 320 ATLANTIC ROAD  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE DVP ☐ Delete  
NAME ORMENO MALONE, LUIS J  
STREET ADDRESS 320 ATLANTIC ROAD  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE D ☐ Delete  
NAME ORMENO MALONE JULIO C  
STREET ADDRESS 320 ATLANTIC ROAD  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE D ☐ Delete  
NAME ORMENO, CABRERA J  
STREET ADDRESS 320 ATLANTIC ROAD  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE DVP ☐ Delete  
NAME ORMENO MALONE MERCEDES I  
STREET ADDRESS 320 ATLANTIC ROAD  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE D ☐ Delete  
NAME ORMENO MALONE MARIA D  
STREET ADDRESS 320 ATLANTIC ROAD  
CITY-ST-ZIP KEY BISCAYNE FL 33149

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
U00000059103  
02/20/04-80067-021 158.75

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Pedro Fortes - E.V.R.

2/18/04 (305) 870-0919