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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000076076 (3)

SUN BEACH REALTY, INC.

Principal Place of Business Mailing Address 1050-93 ST. #5F 1050-93 ST. #5F BAY HARBOR FL 33154 BAY HARBOR FL 33154 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/03/1997 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 650778238 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 X No 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GUILLEN, CESAR 1050-93 ST. #5F Street Address (P.O. Box Number is Not Acceptable) **BAY HARBOR FL 33154** 83 64 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) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition **GUILLEN, CESAR** 1.2 NAME NAME 1050-93 ST. #5F STREET ADDRESS 1.3 STREET ADDRESS **BAY HARBOR FL 33154** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS

CITY-ST-ZIP 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, or on an attachment with an address.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-7IP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE 6.2 NAME

DELETE

☐ DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

2-27-98

305-868-0326

Change

Change

Change

Addition

Addition

Addition

FILED

Mar 17 1998 8:00am

Secretary of State