

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2001 8:00 am
Secretary of State

09-18-2001 90002 015 ***150.00

DOCUMENT # P98000029915

1. Entity Name
SUNNY DAYS ENTERPRISES, INC.

Principal Place of Business

8002 SW 81ST DR.
MIAMI FL 33143

Mailing Address

8002 SW 81ST DR.
MIAMI FL 33143

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0844803

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JIRON, RAMON
16605 SW 100TH CT
MIAMI FL 33157

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **JIRON, RAMON**
STREET ADDRESS **16605 SW 100TH CT.**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/14/01 (305) 270-0081

CR20034 (5/01)

Attachment
P 98000029915
775537
BAYARDO N. AGUILAR, JR., P.A.

CERTIFIED PUBLIC ACCOUNTANT

MEMBER

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

7703 CAMINO REAL, A-411

MIAMI, FLORIDA 33143

TEL: (305) 322-7679 - FAX: (509) 695-9454

September 15, 2001

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Sunny Days Enterprises, Inc.
P98000029915
2001 Uniform Business Report

Dear Sirs:

The above referred taxpayer asked to write to your office regarding the current year report originally due on May 1. Enclosed please find the document duly signed by an officer together with a check in the amount of \$150.00

Taxpayer, a small family owned grocery store, recently engaged my firm to prepare all accounting records and tax returns for the previous years; records are voluminous and transactions are many; precarious financial condition prevented them from hiring a competent professional advise. My firm is advising taxpayer of future deadlines and better compliance monitoring of all licenses and tax documentation.

My office respectfully requests the abatement of penalties and the processing of this year's report as submitted.

Sincerely,



Bayardo N. Aguilar, Jr.
Certified Public Accountant