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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90095 028 ***150.00

DOCUMENT # P98000061548 1. Corporation Name						
SUNSET	SHOPS HOLDING COMPA	ANY				
Principal Place	of Business	Mailing Address	-	f 100(100; 114 10(0) tolit Bein anni earn anni	81101 11001 41111 4	(901 194) 1961
C/O 6910 NW 1	2TH ST	C/O 6910 NW 12TH ST				
MIAMI FL 33126 MIAMI FL 33126				DO NOT WRITE IN THIS	SDACE	
				Date Incorporated or Qualifed	- SI AUL	
				07/13/1998		
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Apr	olied For
21	ace of Business	26		65-08 60371	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	dditional
22		27		5. Certificate of Status Desired . L	Fee Red	uired
City & State	9	City & State		6. Election Campaign Financing	\$5.00 h	- 1
23		28		Trust Fund Contribution	Added to	Fees
Zìp	Country	Zip	Country	8. This corporation owes the current year Int		□No
24	25	29 3		Personal Property Tax. 10. Name and Address of New Registered		
	9. Name and Address of Curre	nt Registered Agent	81 NAThe		Agent	
SAW	yer, edward e		ILA	YMOND J. KAYAL	*****	
	E & CASE LLP		82 Street	Address (P.O. Box Number is Not Acceptable)	-7-	
200 S BISCAYNE BLVD, SUITE 4900			83	10 1000 10 011202		
MIAMI FL 33131					- (
			84 City	VIAMI FL	85 Zip C	.00e
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Statutes	s, the above-named	the state of the s	changing its	registered
office or re	egistered agent, or both, in the State	e of Florida. Such change was aut	horized by the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appo	intment as reg	istered
	In familiar with all a accept the oblig	audis of, Section 607.0303, Flora	d Clatatos.	1/2	1/99	
SIGNATURE	Signature, typed of panted name of registered ag	ent and title if applicable. (NOTE: F	Registered Agent signature r		67/	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AF		
TITLE	D	DELETE	1.1 TITLE	PD Comments T	☑ Change	☐ Addition
NAME	KAYAL, RAYMOND J JR		1.2 NAME	KAYAL RAYMOND J. 6910 NW 12TH STREET		
STREET ADDRESS	6910 NW 12TH ST		1.3 STREET ADDRESS	6910 NW 1214 3/16C1		
CITY-ST-ZIP	MIAMI FL 33126		1.4 CITY-ST-ZIP	MIAMI FL 33126	Change	Addition
TITLE		☐ DELETE	2.1 TITLE	STD	Change	IM Modition
NAME			2.2 NAME	KAYAL, LORAINE S. 6910 NW 12th Street		
STREET ADDRESS			2.3 STREET ADDRESS	6910 NW 12th STICE		
CITY-ST-ZIP		☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	MIAMI FL 33126	☐ Change	Addition
TITLE		Detele	3.2 NAME	_		,
NAME			3.3 STREET ADDRESS			
STREET ADDRESS			3.4. CITY-ST-ZIP			
City-St-ZiP			4.1 TITLE		Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS		•	4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY- \$T- ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME	·		
STREET ADDRESS			6.3 STREET ADDRESS	1		

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 open attachment with an address, with all other like empowered. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #