

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000069842 1. Entity Name SUN INTERNATIONAL PRODUCE COMPANY	
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Principal Place of Business 2230 SW 2ND STREET POMPAN0 BEACH, FL 33069	Mailing Address 2230 SW 2ND STREET POMPAN0 BEACH, FL 33069
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DO NOT WRITE IN THIS SPACE



01092006 No Chg-F CR2E034 (11/05)

4. FEI Number 65-0855556	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**LESLIE, GREGG
2230 SW 2ND STREET
POMPAN0 BEACH, FL 33069**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LESLIE, GREGG 2230 SW 2ND STREET POMPAN0 BEACH, FL 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD BETHAL, ORLAND 3RD ST & CROOKED RUN RD NO VERSAILLES, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BETHEL, GARY 8 THOMAS JEFFERSON DR IRWIN, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGG LESLIE **2/17/06** **(954) 972-8383**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Corporate Phone #