

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90215 049 ***150.00

DOCUMENT # P99000033121 1. Entity Name SUNSET PARKING SYSTEMS, INC.																					
Principal Place of Business 1250 SW 27TH AVE., STE 406 MIAMI, FL 33135		Mailing Address 1250 SW 27TH AVE., STE 406 MIAMI, FL 33135																			
2. Principal Place of Business 5885 COMMERCE LANE Suite, Apt. #, etc.		3. Mailing Address 5885 COMMERCE LANE Suite, Apt. #, etc.																			
City & State SOUTH MIAMI, FLORIDA Zip 33143		City & State SOUTH MIAMI FLORIDA Zip 33143																			
Country USA		Country USA																			
4. FEI Number 65-0931954		Applied For ☐ Not Applicable																			
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																			
6. Name and Address of Current Registered Agent ANDRADE, RAFAEL 19293 W. DIXIE HIGHWAY MIAMI, FL 33180		7. Name and Address of New Registered Agent Name ANDRADE, RAFAEL Street Address (P.O. Box Number is Not Acceptable) 5885 COMMERCE LANE City SOUTH MIAMI State FL Zip Code 33143																			
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 <i>Rafael Andrade</i> DATE 4/27/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees																			
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE PVST</td> <td style="width: 70%;">NAME ANDRADE, RAFAEL</td> <td style="width: 10%; text-align: center;">☒ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1250 SW 27TH AVE.</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>MIAMI, FL 33135</td> <td></td> </tr> </table>		TITLE PVST	NAME ANDRADE, RAFAEL	☒ Delete	STREET ADDRESS	1250 SW 27TH AVE.		CITY-STATE-ZIP	MIAMI, FL 33135		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE PVST</td> <td style="width: 70%;">NAME ANDRADE, RAFAEL</td> <td style="width: 10%; text-align: center;">☒ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>5885 COMMERCE LANE</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>SOUTH MIAMI, FLORIDA 33143</td> <td></td> </tr> </table>		TITLE PVST	NAME ANDRADE, RAFAEL	☒ Change ☐ Addition	STREET ADDRESS	5885 COMMERCE LANE		CITY-STATE-ZIP	SOUTH MIAMI, FLORIDA 33143	
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12. 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 10 or Block 11 if changed, or on an attachment, with an address, with or other like empowered.																					
SIGNATURE: <i>Rafael Andrade</i> PRESIDENT		DATE: 4/27/04 DAYTIME PHONE: (305) 674-8667																			