## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

700 W 76 ST HIALEAH FL 33014

## P99000075758 DOCUMENT #

1. Entity Name

Principal Place of Business

2. Principal Place of Business

185 ATLANTIC BLVD.

KEY LARGO FL 33037

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

SUNRISE HOME DEVELOPMENT, INC.



**FILED** Jan 30, 2003 8:00 am Secretary of State

01-30-2003 90126 029 \*\*\*150.00

30013344

☐ CHECK HERE IS	- MAKII	NG CHANGES
4. FEI Number OF COFOO 10		Applied For
65-0958910		Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required

DATE

MARTINEZ, RAUL L Street Address (P.O. Box Number is Not Acceptable) 700 W 76 STREET HIALEAH FL 33014 Zip Code City

Country

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.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

Country

6. Name and Address of Current Registered Agent

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

9. Election Campaign Financing Trust Fund Contribution.

7. Name and Address of New Registered Agent

\$5.00 May Be Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Delete TITLE Change Addition TITLE NAME NAME MONTEAGUDO, JESUS STREET ADDRESS P.O.BOX 1819 STREET ADDRESS KEY LARGO FL 33037 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME MARTINEZ, RAUL L NAME STREET ADDRESS STREET ADDRESS 700 W 76 ST CITY-ST-ZIP CITY-ST-ZIP HALEAH FL 33014 ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Oelete TITLE : Change ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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 a other like empowered

SIGNATURE:

RAUL L. HARTINEZ 1/27/03