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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$10708

SUNSET ELECTRIC, INC.

(3)

## **FILED** Feb 03 1997 8:00am Secretary of State



Principal Place of Business		Mading Addres	SS			1 IZONIANA NAN BERNA CADIN BONDA HENI DADIN TATAK DADIN BADIN BADIN ZADIN ZADIN			
8830 W 5 PL HIALEAH FL 33012		6630 W 5 PL Hialeah Fl 330 Us	HIALEAH FL 33012-8645						
÷		UV				3. Date Incorporated or Qualified 11/05/1990		of Last R )/1996	eport
2. Principal Fla	ace of Business	2a. Mailing Add	28. Mailing Address 26			4. FEI Number 65-0229145	Applied For Not Applicable		
Suite, Apt 4	#, etc.	t1	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	!	City & State	City & State			6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees			
Zip	Country	Zip	—	Countr	у	8. This corporation has liability for it		x under s	
24	25	29	30	·····			Yes		·
MEIC	<ol><li>Name and Address of Cu SON, DAN A.</li></ol>	irrent Hegistered Agent		81	Name	10. Name and Address of New Reg	parered Ag	jent	<del> </del>
	W 5 PL								
HIALEAH FL 33012				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
ı				83				***************************************	
				84	City	**************************************	FL	<b>85</b> Zip	Code
office or re	egistered agent, or both, in the S	State of Florida. Such cha	ange was autho	rized b	y the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urnose of c	hanging it ntment as	is registered registered
SIGNATURE .	า familiar with, and accept the c								
12.	Styrature, typed or per territario of registers OFFICERS	AND DIRECTORS		13.	eni signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND D	DIRECTOR	S IN 12
TITLE	PSD		DELETE	1.1 TITLE				Change	Addition
NAME	NELSON, DAN A.			1.2 NAME					
STREET ADDRESS	6630 W 5 PL			1.3 STREE	t address				
CITY-ST-7:P	HIALEAH FL			1.4 CITY-	ST-ZIP			7.05	1 1 (2.5)
TITLE NAME		البا		21 TITLE 22 NAME			L.	Change	Addition
STREET ADDRESS					T ADDRESS				
CHY-St ZIP				2. 4 CITY-	ľ				
1:TLE			DELETE	3.1 TITLE				Change	Addition
NAME			1	3.2 NAME					
STREET ADDRESS			•		t address				
CITY-ST-7.P TiTLE				3.4. CITY - 4.1 TITLE	ST-ZIP		·····	Change	Addition
NAME				4 I IIILE 4. 2 NAME				_ Change	L. Addition
STREET ADDRESS					T ADDRESS				
City-St-ZiP				4.4 CITY-					
TITLE				5 1 TITLE	1			Change	Addition
NAME				52 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY-ST-7/P				5 4 CITY -	ST-ZIP			101	1
TITLE				61 TITLE			L	Change	☐ Addition
NAME Dance a Appropriate			1	62 NAME					
STREET ADDRESS			1		T ADDRESS				
CHTY-ST-7/P		P. J. St. de Ch.		64 CITY-	SI-ZIP	1.0			

I do 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 copy of their or the receiver or trustee empoyed do execute this report as required by Chapter 607, Florida Statutes; and that my name