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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation Name

DOCUMENT # S

S39503

(5)

SUN FLORIDA PLASTERING, INC.

| Principal Place of Business | Mailing Address | | | I B 1681 A1861 A1861 A4812 B1841 A1861 81941 1041 |
|---|--------------------------------------|--|---|---|
| 9835 S.W. 76TH ST. MIAMI FL 33173 | 9835 S.W. 76TH ST. MIAMI FL 33173 | | | |
| | | | 3. Date Incorporated or Qualified 03/21/1991 | 3a. Date of Last Report 05/01/1995 |
| Principal Place of Business 21 | 2a. Mailing Address | | 4. FEI Number 65-0249563 | Applied For Not Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #. etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip Country 24 25 | 7 p | Country 30 | 8. This corporation has lability for Florida Statutes | intangitule tax under s. 199.032, No |
| 9. Name and Address of Curre | nt Registered Agent | | 10. Name and Address of New | Registered Agent |
| | | 81 Name | | |
| ibanez, orlando d. | | 82 Street Add | dress (P.O. Box Number is Not Accepta | ble) |
| 9835 S.W. 76TH ST. | | | | |
| MIAMI FL 33173 | | 83 | | |
| | | 84 City | | FL 85 Zip Code |
| 11. Pursuant to trie provisions of Sections 607,050 | 2 and 607.1508, Florida Statu | ites, the above named como | pration submits this statement for the pu | rpose of changing its registered office |
| or registered agent, or both, in the State of Flor familiar with, and accept the obligations of, Sec | Can COZ OBOB. Eloxida Stabila | | | Continent as registered agent. Fam |
| SIGNATURE | ()(| elnudo D.J | baner, Dreector | 2.25.46 |
| Signation Specific printed name of repolated age: | zano tro Sappisanie C | 2015 : Regiscere d'Agent signat va reque | e a vitro remet ingl | [:Azk |
| 12. OF HOERS AN | ID DIRECTORS | 13. | ADDITIONS/CHANGES TO OF | FICERS AND DIRECTORS IN 12 |
| T-TLE D | ☐ DELFTE | 1. 1 T TLE | | Change Addition |
| NAME IBANEZ, ORLANDO D. | | 1.2 NAME | | |
| STREET AUGRESS 9835 S.W. 76TH ST. | | 13 STREET ADDRESS | | |
| City-S1-ZiF MIAMI FL | | 1.4 CiTy - ST - ZiF | | Change Addition |
| TITL É | □ DELETE | 2 1 THILE | | Change Addition |
| NAME | | 2.2 NAME | | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | | |
| 24Y - S1 - ZIP | Fig. No. 111 | 2.4 C(1Y - ST - Z(P | | Change Addition |
| 1Htf | DELETE | 3 ! 11°LF | | C Group. C Massion |
| NAME | | 3 2 NAME | | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIF | DELETE | 3.4 CITY ST-ZIP 4. 1 TITLE | | Change Addition |
| TITLE | | 4.2 NAMS | | |
| NAME | | 4.3 STREET ADDRESS | | |
| STHEFT ADDRESS | | | | |
| C/IY-SI-Z/P | DELETE | 5 1 101 F | | Change Addit-on |
| 11/LE | | 5.2 NAME | | |
| NAME OFFICE | | 5.3 STREET ADDRESS | | |
| STREET ADDRESS | | 5.4 CITY - ST- ZIP | | |
| CITY -ST ZIP | DELETE | 6 1 TILLE | | Change Addition |
| TITLE | | 62 NAM: | | |
| NAME | | 6.3 STREET ADDRESS | | |
| STREET ADDRESS COLY-SI-7/P | | 6.4 City - \$1 - Z.P | | |

14. To hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 early 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 13 if changed, or on an attachment with an address.

SIGNATURE: >

INTERIOR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2.25.46 (305) 279-9021