FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # S45733 1. Entity Name SUN'S LIFE'S TOURISM & TRADE, INC.						Feb 07, 2002 8:00 am Secretary of State 02-07-2002 90016 034 ***163.75		
Principal Place of Business 2217 NEWT STREET ORLANDO FL 32837-7422		Mailing Address 2217 NEWT STREET ORLANDO FL 32837-7422				(100 (100)	(III BIBN BIBN BIBN BIBN	
2. Principal P	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & Stat	e	City & State			4. FEI Number 59-3062084 Applied For Not Applied ber			
Zip	Country	Zip	Count	ry	5. (Certificate of Status Desired	\$8.75 Ac Fee Requir	
2217 NEV	ANTONETA B W STREET D FL 32837			Name Street Address -	(P.O. E	Box Number is Not Acceptable)	FL Zip Co	de
Tax filing r	Signature, typed or printed name of registered agent an oration is eligible to satisfy its Intangible requirement and elects to do so.	rite if applicable. (NOTE FILE NOW!! After May 1, 200 Make Check Payab	!! FEE	will be \$550.00		10. Election Campaign Finance Trust Fund Contribution.	- 4 . +	00 May Be
11.	OFFICERS AND D		12.			 DITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST FRANCO, FERNANDO 2217 NEWT STREET ORLANDO FL	□ Delete					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FRANCO, FERNANDO 2217 NEWT STREET ORLANDO FL	☐ Delete					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FD FRANCO, ANTONIETA B _2217_NEW_7_STREET ORLANDO-FL 32837	☐ Delete				and the second of the second o	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	1	1			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete				·	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition
indicated of the cor	certify that the information supplied with t on this report or supplemental report is t poration or the receiver or trustee empoy or on an attachment with an address, w	rue and accurate and that m vered to execute this report a	ny signat as requir	ure shall have the	same l	legal effect as if made under oath	: that Lam an office	r or director

Jan 19, 2002 (407) 856-7418

CR2E034 (9/01)

2002	UNIFORM BUSI	NESS REPO	RT (UBR	t)	1-			
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Suite, Apt.	#, etc.	Suite, Apt. #, etc.	. ,	•	DO NOT WRITE	IN THIS SPACE		
City & Stat	6	City & State		. 4.	FEI Number 59-3062084	. —	plied For t Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Add Fee Require	itional	
. .	6. Name and Address of Current F	legistered Agent <u>ন এ</u> ন্না	41 1 10 11	· · · · · · 7.	Name and Address of New Reg	istered Agent	-	
			Name	· :		marian and a second		
	, antoneta B V street	1	Street Ac	idress (P.O. i	Box Number is Not Acceptable)			
	O FL 32837	A STATE OF STATE OF		;	A POLICE OF THE ACT	Control Company		
8. The above	named entity submits this statement for	the purpose of changing its	City registered office or	registered aç	gent, or both, in the State of Floric	FL Zip Code		
9. This corportax filing is	Signature, typed or printed name of registered agent at praction is eligible to satisfy its Intangible requirement and elects to do so.	nd title if applicable. (NOTE	registered office or NANCIAL Registered Agent signatur (FEE'IS) 150.0 2 (FEE'WILLDOSS)	Drace re required when r	TOR MILE OF MILES	da. JAN 19 DATE S5.0	2002 0 May Be to Fees	
9. This corporate filling in (See criter)	Signature, typed or printed name of registered agent as praction is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	nd title if applicable. (NOTE After May, 15, 201 Mait of Grocking systems	registered office or INAN ETAL Registered Agent signatur ITELEUS \$150.0 REGISTERED STATE ITELEUS STATE ITEL	Dyne core required when in 50,000, of State	TOR reinstating) 10. Election Campaign Finan Trust Fund Contribution.	DATE \$5.0 Added	2002 0 May Be to Fees	
9. This corporate for the state of the state	Signature, typed or printed name of registered agent au pration is eligible to satisfy its Intangible requirement and elects to do so. OFFICERS AND D PST FRANCO, FERNANDO 2217 NEWT STREET	nd title it applicable. (NOTE ATEP/May/15/20 MakeCheckirsyab Directors Delete	registered office or Proposition of the control of	Dyne core required when in 50,000, of State	10. Election Campaign Finan Trust Fund Contribution.	DATE \$5.0 Added	2002 0 May Be to Fees	
9. This corporate (See criter) 11.	Signature, typed or printed name of registered egent at praction is eligible to satisfy its Intangible requirement and elects to do so, ria on back) OFFICERS AND E PST FRANCO, FERNANDO 2217 NEWT STREET ORLANDO FL VD FRANCO, FERNANDO 2217 NEWT STREET.	nd title it applicable. (NOTE ATEP/May/15/20 MakeCheckirsyab Directors Delete	registered office or Personal Property of the Control of the Cont	Dyne core required when in 50,000, of State	10. Election Campaign Finan Trust Fund Contribution.	da. JAN 19 DATE S5.0 Addect ERS AND DIRECTORS Change	2002 0 May Be to Fees	
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9. This corporate filling in (See criter) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered egent autoration is eligible to satisfy its Intangible requirement and elects to do so. ria on back) OFFICERS AND E PST FRANCO, FERNANDO 2217 NEWT STREET ORLANDO FL VD FRANCO, FERNANDO 2217 NEWT STREET. ORLANDO FL FD FRANCO, ANTONIETA B 2217 NEW 7 STREET	Delete Delete Delete	registered office or In An Electron Agent signature If FERIS \$150.02 IF OWNED SET STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Drecce required when no construction of the co	Tore reinstating) 10. Election Campaign Finan Trust Fund Contribution. DDITIONS/CHANGES TO OFFICE 10. Election Campaign Finan Trust Fund Contribution.	da. JAN 19 DATE \$5.0 Added ERS AND DIRECTORS Change Change	2002 O May Be to Fees SIN 11 Addition Addition	

13. I hereby certify that the information supplied with this filing does not qualify to 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 11 or Block 12 if changed, or on an attachment with an address, with allotter like empowered.

SIGNATURE

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