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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

Secretary of State

FILED

Apr 29 1998 8:00am

DOCUMENT # S49772 (4) SUN BRITE NURSERY, CORP.									
Principal Place of Business Mailing Address									
10720 S.W. 34TH STREET 4545 N.W. 7TH STREET MIAMI, FL 33165 12					1		DO NOT HIDET IN THE OR LOT		
			Miami, Fi Us	L 33126			DO NOT WRITE IN THIS SP 3. Date Incorporated or Qualified	ACE	
			00				05/03/1991		
2. Principal P	lace of Busin	2a. Mailing	2a. Mailing Address			4, FEI Number	Арі	plied For	
21	26				65-0260961		t Applicable		
Suite, Apt.	_ ├ ─	Suste, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A			
City & State	27 City & S	City & State			6. Election Campaign Financing \$5.00 May Be				
23			28	28			Trust Fund Contribution	Added to	
Zip	, , , , , , , , , , , , , , , , , , ,			Zip Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No		
24		25 and Address of Curre	29		30		Personal Property Tax due June 30.		No
-			ent Registered Ag	ent	81	Name	10, Name and Address of New Hegistered Ag	ent	
10 M	iiamii Fl	34TH STREET			82 83 84	City	FL I	85 Zip C	
office or reagant. again. again.	,	ons of Sections 607.05 ont, or both, in the Sta th and accept the obtained by the section of the					rporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoin	nanging its	registered
12.			ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	PST	TO CHILDA	L	DELETE	1.1 TITLE		L	Change	Addition
NAME .	\$ EAPUS	ITO, ENEIDA §.W. 34TH ST.			1.2 NAME	- Induced			[7
STREET ADDRESS	> MIAME	gan. 341⊓ 31. ≸]			1.3 STREET				
TITLE	VD			DELETE	2.1 THILE	51 - ZIF		Change	Addition
NAME .		TO, ENEIDA			2.2 NAME	1	_		
STREET AMORESS		S.W. 34TH ST.			2.3 STREET	ADDRESS		Ţ	
CITY-ST-ZII	MAM	FL			2. 4 CITY-	ST-ZIP			
TITLE	1			DELETE	3.1 TITLE			Change	Addition
NAME					3.2 NAME				
STREET ADDRESS						ADDRESS			
TITLE				DELETE	3.4 CITY-1	S1-ZIP		Change	Addition
NAME			•		4. 2 NAME		_	T cumbo	rodition
STREET ADDRESS					4.3 STREET	ADDRESS			ļ
CITY-ST-ZIP					4.4 CITY - S				
TITLE				DELETE	5.1 TITLE			Change	Addition
NAME					5.2 NAME				
STREET ADDRESS					5.3 STREET	ADDRESS			ľ
CITY-ST-ZIP					5.4 CITY - S	IT- ZIP			-
TITLE			Ĺ	DETEIE	6.1 TITLE		Ĺ	Change	☐ Addition
NAME					6.2 NAME				
STREET ADDRESS					6.3 STREET	ì			}
CITY-ST-ZIP	ertify that the	information supplied	with this filing does	not qualify fo	6.4 CiTY-5		n Section 119 07(3)(i) Florida Statutes I further certif	v that the i	information

nereby ceruly that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or supplienental 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 corporation of the receiven or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed an attachment with an address

3/9/98