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 # V22431

(3)

V.T.T. OF SUNRISE, INC.

cipal Place of Business	Mailing Address
WEST MCNAB ROAD	BO10 WEST MCNAB ROAD
TH LAUDERDALE FL 33068	North Lauderdale FL 33068-4226

FILED May 07 1997 8:00am Secretary of State



Principal Place of Business Mailing Address											
6010 WEST MCNAB ROAD NORTH LAUDERDALE FL 33068		BO10 WEST MCNAB ROAD NORTH LAUDERDALE FL 33068-4226									
÷							3.	Date Incorporated or Qualified 03/26/1992		ate of Last 01/1996	
2. Principal P	lace of Business	2a, Mailm	a Address				<u>-</u> -	FEI Number	00/1		Applied For
21		26	ga				"	65-0336553			Not Applicable
Suite, Apt.	#. etc.		Apt. #. etc.					00 0000000			Additional
22		27	,				5.	Certificate of Status Desired			Required
City & State	6	City &	State				-	Election Campaign Financing			O May Be
23		28					6,	Trust Fund Contribution			о мау ве d to Fees
Zip	Country	Zip		Coi	intry			This corporation has liability for			
24	25	29		30	,		"		Z Yes		3. 155.002,
	9. Name and Address of Currer		lgent	1531	Π		10.	Name and Address of New Re			
901	DSTONE, RICHARD P.A.				81	Name					
	WEST SAMPLE ROAD				2.5						
	FE-202				82	Street Act	oress (F	O.O. Box Nornber is Not Accontain	ole)		
	MPANO BEACH FL 33073				83	2)	T. >	Ph 0 1			
ron	MI AND BEACH I E 00070					/3/0	9.3	+ 3H			
					84	City	•		FL	85 Zu	p Code
44 Durawant	to the provining of Continue 607 040	12 and 607 11.00	9 Florido Ctotul	lac tha a	L_ [named on	moralia	as submits this statement for the		Cobonaine	ite registered
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	of Horida Suc	h change was	authorize	d by	the corpora	ation's l	board of directors. Thereby acce	ot the app	ointment a	is registered is registered
agent I a	m familiar with, and accept the oblig	ations of, Section	on 607.0505, FI	orida Sta	tutes	i.					
SIGNATURE											
40	Signature, typed or printed name of registered age	D DIRECTORS	p.e. (AC)		ed Age	nt signature requ			DATE	DIDECT	200 IN 10
12.	D	D DINECTORS	DELETE	13. 1,1 T	1114	<u>_</u>		ADDITIONS/CHANGES TO OFFICE	JENS AINL	Change	
	LINDAUER, BARRY		L. OLLLI	- E						☐ Onengo	. E Nontroll
NAME	8010 WEST MCNAB ROAD			1.2 N							
STREET ADDRESS	NORTH LAUDERDALE FL			- 1		ADORESS					
CITY-ST-ZIP	D D		DELETE		ITY-S	1-7lP				T 1 Change	Addit or
TITLE	_		L3 DUTE IE	2.1 T						☐ Change	e [_] Addition
NAME	WEINRAUB, HOWARD			22 N							
STREET ADDRESS	8010 WEST MCNAB ROAD			2.3 S	IREET	ADDRESS					
CITY-ST-ZIP	NORTH LAUDERDALE FL					SI - ZIP					
TITLE			☐ DELETE	3.1 T	1116					L Change	e [_] Addition
NAME				3.2 N	AME						
STREET ADDRESS				3.3 \$	TREET	ADDRESS					
CITY-ST-ZIP			- -			31 - 7IP					·
TITLE			DEFER	4.1 T	Πŧŧ					Change	Addition
NAME				4.21)MAV	1					
STREET ADDRESS				438	THEE1	ADDRESS					
CITY-ST-ZIP				440	ITY-S	T-71P					
TITLE			DELETE	5 1 T	ITLF		·······			Change	e 🔲 Addition
NAME				52 N	AME	Į					
STREET ADDRESS				53S	1866	ADDRESS					
CITY-ST-ZIP					IIY-S						
TITLE			DELETE	6.1 T						Change	a Addition
NAME			-	62 N							
STREET ADDRESS			•	1		ADURESS					
CITY-ST-ZIP						1-21P					
MI1-91-51	<u> </u>			0.4 (411-5	1-71h					

14. 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 + 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 offect as if made under eath; that I am an officer or directly roll the corporation out the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 11 if changed, from in attachment with an address.

Urza ST CSUDILLASID