## FILE NOW: FILING FEE AFTER MAY 1 IS \$55D.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # V37653

1. Corporation Name

(5)

SUN CLEANING, INC.

Principal Place of Business

7780 SW 1 STR MARGATE FL 33088 HS Mailing Address

7780 SW 1 STR MARGATE FL 33068-1218

## FILED May 16 1997 8:00am Secretary of State



US		US			
				3. Date Incorporated or Qualified 05/18/1992	3a. Date of Last Report 04/17/1996
2. Principal P	lace of Business 4 N.W 73 Aue	2a. Mailing Address 26 39 2 4 N	W 7300	4. FEI Number 65-0329727	Applied For Not Applicable
Sulte, Apt		Suile, Apt. #, etc.			SR 75 Additional
22		27		5. Certificate of Status Desired	Fee Regulred
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
23 COCA	Springs Fl	28 Coral Spr	ings F	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24 330		29 33065 30	)		Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent  OOUTE MARIO  81 Name					
	DUIS, MARIO		81 Name	÷	
7780 SW 1ST ST.  82 Street Address (P.O. Box Number is Not Acceptable)					
MARGATE FL 33068 3924 NW 73 Aue					
			65		
			84 City	Coral Springs	FL 85 Zip Code 33065
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I horeby accept the appointment as registered					
. office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and fille if applicable (NOTL Higgstifted Agent signature required when reinstating)  DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	P	DELETE	1.1 TALE		Change Addition
NAME	COQUIS, DAFNE		1.2 NAME	Coquis Onfine	
STREET ADDRESS	7780 SW 1ST ST.		1.3 STREET ADDRESS	3924 NW 73AUE	{
CITY-ST-ZIP	MARGATE FL		1.4 C(TY - ST - 2)P		33065
TITLE	V	☐ DELETE	2 1 TIILE	Ρ	Change Addition C
NAME	COQUIS, MARIO		2.2 NAME	CoguIS MARIO 3924 NW 73 AU	2
STREET ADDRESS	7780 SW 1ST ST.		1	3924 NW 73 AU	C1230(T
CITY-ST-ZIP	MARGATE FL	DELETE	2 4 CITY-ST-ZIP	COCAL Springs	F   3 3003
TITLE		ר"ו הרדג וד	3.1 TITLE 3.2 NAME		Change Addition
NAME					
STREET ADDRESS			3.3 STHEET ADDRESS 3.4, CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	41 TITLE		Change Addition
NAME		Monda	4 2 NAME		the state of the s
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY- \$1 - 7IP		
TITLE		☐ DELETE	5.1 TALL		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - S1 - ZIP		
TITLE		☐ DELETE	6.1,1111.6		☐ Change ☐ Addition
NAME		•	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			G.4 CITY - ST - ZIP		

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. 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 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 12 or Block 13 if changed, or on an attachment with an address.

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5-7-97

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