2006 FOR PROFIT CORPORATION

Apr 12, 2006 8:00 am Secretary of State ANNUAL REPORT 04-12-2006 90098 010 ***150.00 **DOCUMENT #677326** 1. Entity Name SUNMARK EQUITIES CORP. Principal Place of Business Mailing Address 50010967 800 WEST CYPRESS CREEK 800 WEST CYPRESS CREEK **STE 350 STE 350** FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 US 2. Principal Place of Business 3. Mailing Address 7300 W. Camino Reas 7300 W. Camino Real Suite, Apt. #, etc. Suite, Apt. #, etc. 04102006 CR2E034 (11/05) Cha-P Suite 122 122 Suite 4. FEI Number Applied For City & State City & State RATON, FL 59-2023748 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent address KRINSKY, JAY Street Address (P.O. Box Number is Not Acceptable) 800 WEST CYPRESS CREEK RD STE 350 FORT LAUDERDALE, FL 33309 City aton 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered abent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. П Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. DP TITLE TITLE Defete NAME KRINSKY, JAY NAME 7300 W. Camino Real, #122 800 W. CYPRESS CREEK RD., STE 350 STREET ADDRESS STREET ADDRESS BOCA RATON FL 33433 CITY-ST-ZIP FORT LAUDERDALE, FL 33309 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Addition Change NAME KRINSKY, TINA NAME 7300 W. Camino Real, #122 STREET ADDRESS 800 W. CYPRESS CREEK RD. STE 350 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33309 CITY-ST-ZIP Ration FL 33433 IME Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or Supplemental yeport 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 a required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on any attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED