2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000084819

MARQUEZ, GUILLERMO

19416 NW 56 PL

MIAMI, FL 33055 US

Name: Address:

City-St-Zip:

FILED Nov 17, 2005 Secretary of State

Entity Name: SUNSHINE AVIONICS, CORP. **Current Principal Place of Business: New Principal Place of Business:** 12040 MIRAMAR PARKWAY MIRAMAR, FL 33025 **Current Mailing Address: New Mailing Address:** 12040 MIRAMAR PARKWAY MIRAMAR, FL 33025 FEI Number: 51-0421624 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GONZALEZ, LEON 12820 SW 70 LN MIAMI, FL 33183 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete () Change () Addition GONZALEZ, LEON Name: Name: 12820 SW 70 LN Address: Address: City-St-Zip: MIAMI, FL 33183 US City-St-Zip: Title: VP. Title: () Change () Addition () Delete MORE, GEORGE Name: Name: 6330 COOLIDGE ST Address: Address: HOLLYWOOD, FL 33024 US City-St-Zip: City-St-Zip: () Delete SEC. Title: (X) Change () Addition Title: VP DOMINGUEZ, PABLO A Name: DOMINGUEZ, PABLO A Name: 7030 NW 177 ST. #101A 7030 NW 177 ST. #101A Address: Address: City-St-Zip: MIAMI, FL 33015 US City-St-Zip: MIAMI, FL 33015 US Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LEON GONZALEZ PRES 11/17/2005