2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125033

6112 CHESHIRE LANE

ORLANDO, FL 32819

Address:

City-St-Zip:

Entity Name: SUNSHINE PRODUCTS & SERVICES, INC.

FILED Apr 28, 2009 Secretary of State

Current P	Principal Place	e of Business:	New Principal Place o	New Principal Place of Business:	
	SHIRE LANE O, FL 32819		6112 CHESHIRE LANE ORLANDO, FL 32819	US	
Current N	lailing Addre	ss:	New Mailing Address:	New Mailing Address:	
PO BOX 692695 ORLANDO, FL 328692695			PO BOX 692695 ORLANDO, FL 328692	PO BOX 692695 ORLANDO, FL 328692695 US	
FEI Number	: 59-3782825	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
6112 CHE	BENJAMIN H II SHIRE LANE D, FL 32819	US			
	e named entity e of Florida.	submits this statement for th	e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered A	Agent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BONDS, BENJ 6112 CHESHIF	RE LANE	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name	V () Delete AMIN H .IR	Title: () Change () Addition	

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: JAMIN BONDS P 04/28/2009