2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P94000044808

Entity Name: SUNSHINE BLOODSTOCK, INC.

Current Principal Place of Business:

541 GOLDEN HARBOUR DR
BOCA RATON, FL 33432

New Principal Place of Business:

400 NE 3RD ST.
BOCA RATON, FL 33432

Current Mailing Address:

541 GOLDEN HARBOUR DR
BOCA RATON, FL 33432

New Mailing Address:

400 NE 3RD ST.
BOCA RATON, FL 33432

FEI Number: 65-0518200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JORGE J. AMEGLIO
400 NE 3RD ST
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JORGE AMEGLIO,
Address: 400 NE 3RD ST
City-St-Zip: BOCA RATON, FL 33432

Title: VP ( ) Delete
Name: KRISNA KARINA AMEGLI, O
Address: 400 NE 3RD ST
City-St-Zip: BOCA RATON, FL 33432

Title: 2V ( ) Delete
Name: PARENTEAU, FABIOLA
Address: 400 NE 3RD ST
City-St-Zip: BOCA RATON, FL 33432

Title: T ( ) Delete
Name: DORATI, SOLMORAINE
Address: 400 NE 3RD ST
City-St-Zip: BOCA RATON, FL 33432

Title: S ( ) Delete
Name: AMEGLIO, MONICA
Address: 400 NE 3RD ST
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JORGE AMEGLIO MR. 05/01/2006

Electronic Signature of Signing Officer or Director — Date