2006 FOR PROFIT CORPORATION

Jan 30, 2006 8:00 am ANNUAL REPORT **Secretary of State** DOCUMENT # S32572 01-30-2006 90073 022 ***150.00 1. Entity Name SUN TERMINALS, INC. Principal Place of Business Mailing Address 11000 NW 29 STREET, # 201 11000 NW 29 STREET, # 201 MIAMI, FL 33172 US MIAMI, FL 33172 US 01252006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0246224 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PERDOMO, CARLOS DO NOT WRITE 11000 N.W. 29TH ST. SUITE 201 MIAMI, FL 33172 IN THIS SPACE 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 with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstalling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME PERDOMO, CARLOS STREET ADDRESS 11000 N.W. 29TH ST. SUITE 201 CITY-ST-ZIP MIAMI, FL 33172 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

CHARLING AND PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

Davtime Phone #

FILED