

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S95472

FILED  
Apr 17, 2010  
Secretary of State

**Entity Name:** SUNSHINE MAIDS' SERVICE CORP.

**Current Principal Place of Business:**

7154 N. UNIVERSITY DR., STE 182  
TAMARAC, FL 33321 US

**New Principal Place of Business:**

**Current Mailing Address:**

7154 N. UNIVERSITY DR., STE 182  
TAMARAC, FL 33321 US

**New Mailing Address:**

FEI Number: 65-0288671      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

NINOSKA, RODRIGUEZ M  
4980 E. SABAL PALM BLVD., 340  
TAMARAC, FL 33319 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RODRIGUEZ, NINOSKA M  
Address: 4980 E. SABAL PALM BLVD. #340  
City-St-Zip: TAMARAC, FL 33319 US

Title: VP  
Name: RODRIGUEZ, ORLANDO K  
Address: 8109 LAKEPOINTE COURT  
City-St-Zip: PLANTATION, FL 33322 US

Title: S  
Name: GARCIA, GISEL S  
Address: 3545 NE 167 ST #401  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

I hereby 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 all other like empowered.

SIGNATURE: NINOSKA M. RODRIGUEZ

P

04/17/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date