

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124907

Entity Name: SUNSHINE FONSECA, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

530 BELLE GROVE LANE
WESTPALM BEACH, FL 33411

New Principal Place of Business:

1183 IMPERIAL LAKE ROAD
WESTPALM BEACH, FL 33413

Current Mailing Address:

530 BELLE GROVE LANE
WESTPALM BEACH, FL 33411

New Mailing Address:

1183 IMPERIAL LAKE ROAD
WESTPALM BEACH, FL 33413

FEI Number: 20-1555027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FONSECA, ALEJANDRO
530 BELLE GROVE LANE
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

FONSECA, ALEJANDRO
1183 IMPERIAL LAKE ROAD
WEST PALM BEACH, FL 33413 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FONSECA, ALEJANRO
Address: 530 BELLE GROVE LANE
City-St-Zip: WPB, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FONSECA, ALEJANRO
Address: 1183 IMPERIAL LAKE ROAD
City-St-Zip: WPB, FL 33413

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: ALEJANDRO FONSECA

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date