

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M97420

Entity Name: SUNSHINE ACCOUNTING & INSURANCE AGENCY CORP.

Current Principal Place of Business:

1925 EAST 4TH AVE
SUITE # 2
HIALEAH, FL 33010

Current Mailing Address:

1925 EAST 4TH AVE
SUITE # 2
HIALEAH, FL 33010

FEI Number: 65-0065769

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOMEZ, ILEANA
1925 E. 4TH AVE.
HIALEAH, FL 33010 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | | | |
|-----------------|----------------------|-----------------|----------------------|
| Title | P/D | Title | VS/D |
| Name | GOMEZ, ILEANA | Name | ROVIRA, JOSE I. |
| Address | 8796 NW 140 LN | Address | 8796 NW 140 LANE |
| City-State-Zip: | MIAMI LAKES FL 33018 | City-State-Zip: | MIAMI LAKES FL 33018 |

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: ILEANA GOMEZ

PRESIDENT

04/21/2015

Electronic Signature of Signing Officer/Director Detail

Date