2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 349385

Title:

Name:

Address:

City-St-Zip:

Entity Name: SUNSHINE CORDAGE CORPORATION

FILED Jan 27, 2009 Secretary of State

Thing Name: Colvorate Colv					
Current Principal Place of Business:			New Principal Place of Business:		
7250 NW 4 MIAMI, FL	1 ST. 331666712				
Current Mailing Address:			New Mailing Address:		
7250 NW 4 MIAMI, FL	1 ST. 331666712				
FEI Number:	59-1265922	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
1119 OBISI	A, ALFREDO S PO ST ABLES, FL 331				
The above in the State		ubmits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			t	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I CARRANZA,ALF 1119 O BISPO S CORAL GABLES	т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () I CARRANZA, EDI 2941 SW 77TH I MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I CARRANZA, EDI 2941 SW 77 PLA MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ALFREDO CARRANZA PRES 01/27/2009

() Delete

CARRANZA, GUILLERMO, D

CORAL GABLES, FL 33134

700 BILTMORE WAY-APT 812

() Change () Addition