2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005671

Entity Name: SUNRIVER CONSULTANTS LIMITED CORP.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1900 SW MIAMI, FL	3RD AVENUE 33129	<u> </u>			
Current Mailing Address:			New Mailing Address:		
1900 SW MIAMI, FL	3RD AVENUE . 33129	=			
FEI Numbe	r: 98-0362344	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name an	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
	OWELL-COSIC 3RD AVENUE 33129 US				
	e named entity	culposita this statement for the	and the contract of the contra		
in the Stat	te of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
in the Stat SIGNATU	te of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
	te of Florida. JRE:	onic Signature of Registered Ag		d office or registered agent, or both, Date	
SIGNATU	te of Florida. JRE: Electro				
SIGNATU	te of Florida. JRE: Electro	onic Signature of Registered Ag	ent		
SIGNATU	te of Florida. JRE: Electro ampaign Financia RS AND DIRECTO PS (LEITE, PAULO RUA IMPANER	onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete	ent	Date	
SIGNATU Election Ca OFFICER Title: Name: Address:	te of Florida. JRE: Electro ampaign Financia RS AND DIRECT PS (LEITE, PAULO RUA IMPANEI 991504 RIO D LEITE JR, PAI RUA IMPANEI	onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete OMA DE JANEIRO, BRAZI,) Delete ULO	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:	

I hereby certify that the information supplied with this filing does not qualify for the 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: LIA LEITE D 04/28/2006