

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002151

**FILED**  
**Feb 08, 2009**  
**Secretary of State**

**Entity Name:** SUNSHINE PROPERTY INC.

**Current Principal Place of Business:**

C/O ATU CORPORATE SERVICES  
ANGUILLA INC., SPENCER HOUSE  
THE VALLEY ANGUILLA B.W.I., OC

**New Principal Place of Business:**

C/O ATU CORPORATE SERVICES  
ANGUILLA INC., SPENCER HOUSE  
THE VALLEY ANGUILLA B.W.I., XX 00000 OC

**Current Mailing Address:**

TRIADVICE AG  
DREIKOENIGSTRASSE 8, P.O. BOX 2899  
CH-8022 ZURICH, OC

**New Mailing Address:**

TRIADVICE AG  
DREIKOENIGSTRASSE 8, P.O. BOX 2899  
CH-8022 ZURICH, XX 00000 OC

**FEI Number:** 98-0481856

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FENNER, BEAT M  
1030 CONECTA DRIVE  
PUNTA GORDA, FL 33950 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:** D ( ) Delete  
**Name:** TRIADVICE CORPORATIO, N  
**Address:** 3076 SIR FRANCIS DRAKE'S HWY, PO BOX 3463  
**City-St-Zip:** ROAD TOWN TORTOLA B.V.I., OC

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** D (X) Change ( ) Addition  
**Name:** TRIADVICE CORPORATIO, N  
**Address:** 3076 SIR FRANCIS DRAKE'S HWY, PO BOX 3463  
**City-St-Zip:** ROAD TOWN TORTOLA B.V.I., XX 00000 OC

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:** NEHER

D

02/08/2009

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

\_\_\_\_\_  
Date