### 2008 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # F05540

1. Entity Name

SUNSHINE ALUMINIUM SPECIALTIES, INC.



FILED Apr 25, 2008 08:00 AN Secretary of State

Principal Place of Business

5420 MAULE WAY

P.O. BOX 16245 MANGONIA PARK, FL 33407

Mailing Address

P.O. BOX 16245

P.O. BOX 16245

WEST PALM BEACH, FL 33416 U



04162008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2035474

Not /

5. Certificate of Status Desired

\$8.75 Additi Fee Required

### DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WICHTERMAN, THOMAS O. 5420 MAULE WAY MANGONIA PARK, FL 33407

## DO NOT WRITE IN THIS SPACE

6. The above the obligat	named entity submits this statement for the $\rho$ ions of registered agent.	ourpose of changing its re	gistered office or r	egistered agent, or both,	in the State of Florida. I am familiar with, ar
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: R	egistered Agent signature	required when reinstating)	CATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS			
TITLE	PD				
NAME	WICHTERMAN, THOMAS O				
STREET ADDRESS	5662 SNEAD CIRCLE				

CITY-ST-ZIP W PALM BCH, FL 00000. TITLE ۷P JARRIEL, ROBERT J SR NAME STREET ADDRESS 800 RANCH RD CHY-SI-ZIP WEST PALM BEACH, FL TITLE HAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

U00000920500 05/14/08-80046-020 150.00

# DO NOT WRITE IN THIS SPACE

<sup>12.</sup> I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer of the corporation or the receiver or fystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or E changed, or on an attachment with an address, with all other like empowered.