


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2007 08:00 AM
Secretary of State

DOCUMENT # K17212
 1. Entity Name
 SUNSHINE SCHOOL UNIFORM AND SUPPLY COMPANY



Principal Place of Business
 9781 NW 91 CT.
 MEDLEY, FL 33178

Mailing Address
 9781 NW 91 CT.
 MEDLEY, FL 33178

DO NOT WRITE IN THIS SPACE



07162007 No Chg-P CR2E034 (11/05)

4. FEI Number
 59-0028428 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CRUZ, HECTOR
 9781 NW 91 CT.
 MEDLEY, FL 33178

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

1000000770585
 07/26/07-80004-001 550.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CRUZ, HECTOR 9781 NW 91 CT. MEDLEY, FL 33178
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12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #