

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000090469

Entity Name: SUNSHINE CORNER, LLC

**FILED**  
**Apr 28, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

52 MARINERS LANE  
NORTHPORT, NY 11768

**New Principal Place of Business:**

**Current Mailing Address:**

52 MARINERS LANE  
NORTHPORT, NY 11768

**New Mailing Address:**

FEI Number: 20-2010555

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD # 221E  
PALM BEACH GARDENS, FL 33410 US

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

LAW OFFICES OF THOMAS L. COSTA  
6 PORTA VISTA CIRCLE  
PALM BEACH GARDENS, FL 33111 US

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: ON BEHALF OF THOMAS L. COSTA

04/28/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ALESANDRO, MICHAEL  
Address: 52 MARINERS LANE  
City-St-Zip: NORTHPORT, NY 11768

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL ALESANDRO

MGR

04/28/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date