

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081172

Entity Name: SUN HOMES CAPITAL, LLC

FILED
Sep 08, 2008
Secretary of State

Current Principal Place of Business:

735 NW 101 TERRACE
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

735 NW 101 TERRACE
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 20-3318963 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NIZRI, UZI
735 NW 101 TERRACE
PLANTATION, FL 33324 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NIZRI, UZI
Address: 735 NW 101 TERRACE
City-St-Zip: PLANTATION, FL 33324 FL

Title: MGRM () Delete
Name: NIZRI, DAVID
Address: 735 NW 101 TERRACE
City-St-Zip: PLANTATION, FL 33324 US

Title: MGRM () Delete
Name: LEVI, SHLOMO
Address: 735 NW 101 TERRACE
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES:

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

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

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

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 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: UZI NIZRI

MGR

09/08/2008

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