


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 11, 2007 8:00 am
Secretary of State

03-27-2007 90206 009 ****50.00

DOCUMENT # L06000048326			
1. Entity Name SUNSHINE EXECUTIVE COMPANY, LLC			
Principal Place of Business 505 SPENCER DR APT 404 WEST PALM BEACH FL 33409		Mailing Address 505 SPENCER DR APT 404 WEST PALM BEACH FL 33409	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent MACEDO, TANIA 505 SPENCER DR APT 404 WEST PALM BEACH FL 33409		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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		DATE	
<p>FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007</p>			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR MACEDO, TANIA 505 SPENCER DR APT 404 WEST PALM BEACH FL 33409	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Tania Macedo</i>		DATE: 03/10/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE	

30007330

FILED AND REGISTERED WITH THE OFFICE OF THE SECRETARY OF STATE, TALLAHASSEE, FLORIDA

FEI 2083 (10/06)

4. FEI Number
 20-4856444
 Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

ATTACHMENT

30007398
#L0600004832e

Sunshine Executive Company LLC
505 Spencer Drive # 404
West Palm Beach, FI 33409
561-541-3774

Florida Department Of State
Divisions of Corporations

May 8, 2007

Please be advised that the FIN number 20-4856444 has been confirmed as the correct number to be listed in block 4 of the annual report for Sunshine Executive Company LLC. We called the 1-800 number on the letter you sent and spoke to Maria. She suggested we write this letter to be attached to the Annual Report.

Louisa Maciedo