2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070585

Address:

Title:

PO BOX 143284

() Delete

City-St-Zip: CORAL GABLES, FL 33114

MGRM

Entity Name: SUNSHINE APARTMENTS, LLC

FILED Apr 17, 2007 Secretary of State

Current Principal Place of Business: PO BOX 143284 CORAL GABLES, FL 33114 Current Mailing Address:		New Principal Place of Business: 18041 SW 149TH COURT MIAMI, FL 33177 New Mailing Address:					
				PO BOX 143284 CORAL GABLES, FL	33114		
				FEI Number: 20-5222926	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:				
OLIVER, ORLANDO 17220 NW 53 PLACE CAROL CITY, FL 330	55 US						
The above named enti in the State of Florida.	ty submits this statement for the լ	ourpose of changing its registered	d office or registered agent, or both				
SIGNATURE:							
Elect	ronic Signature of Registered Ag	ent	Date				
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:				
Title: MGRM Name: KNOBLOCK	()Delete , KAREN C	Title: Name:	() Change () Addition				

Address:

Title:

City-St-Zip:

() Change () Addition

GOMEZ, LUCIÓ M Name: Name: Address: PO BOX 143284 Address:

CORAL GABLES, FL 33114 City-St-Zip: 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: KAREN KNOBLOCK **MGRM** 04/17/2007