

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099406

Entity Name: SUNSHINE HOLDING, LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

4044 MERIDIAN AVE
3A
MIAMI BEACH, FL 33140

Current Mailing Address:

4044 MERIDIAN AVE
3A
MIAMI BEACH, FL 33140

FEI Number: 20-5713493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

300 41 STREET
201A
MIAMI BEACH, FL 33140

New Mailing Address:

300 41 STREET
201A
MIAMI BEACH, FL 33140

Name and Address of Current Registered Agent:

LUCOFF, ESQ., JOEL D
12925 S.W. 30 ST.
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

BOAZIZ., MOTI D
300 41 STREET
201A
MIAMI BEACH, FL 33140 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: MORDECHAI BOAZIZ

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BOAZIZ, MORDECHAI
Address: 300 WEST 41ST STREET #201
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR () Delete
Name: LEVY, HENRI
Address: 4044 MERIDIAN AVE., SUITE 3A
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: LEVY, HENRI
Address: 300 41 STREET #201A
City-St-Zip: MIAMI BEACH, FL 33140

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: MORDECHAI BOAZIZ

MGR

04/27/2009

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