

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 08:00 A
Secretary of State

DOCUMENT # L52813
 1. Entity Name
 SUNRISE EQUIPMENT, INC.



Principal Place of Business
 1622 ST VILLAGE GREEN DR
 PORT ST. LUCIE, FL 34952

Mailing Address
 1622 ST VILLAGE GREEN DR
 PORT ST. LUCIE, FL 34952

DO NOT WRITE IN THIS SPACE



03032008 No Chg-P CR2E034 (11/05)

4. FEI Number
 65-0234053

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ORTIGAS, DANTE
 1622 SE VILLAGE GREEN DR.
 PORT SAINT LUCIE, FL 34952

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B. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000850625
 03/25/08-80006-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	ORTIGAS, DANTE
STREET ADDRESS	1622 SE VILLAGE GREEN DR
CITY-ST-ZIP	PORT SAINT LUCIE, FL 34952
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Dante A. Ortigas **2-29-08** **772 335 1902**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #