

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000008843

FILED
Sep 29, 2009
Secretary of State

Entity Name: SUNSHINE GARDEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

452 W. 83RD PLACE
HIALEAH, FL 33016

New Principal Place of Business:

452 W. 40TH PLACE
HIALEAH, FL 33012

Current Mailing Address:

452 W. 83RD PLACE
HIALEAH, FL 33016

New Mailing Address:

452 W. 40TH PLACE
HIALEAH, FL 33012

FEI Number: 26-1108740 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SILES, JUAN
452 W. 83RD PLACE
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

SILES, JUAN
452 W. 40TH PLACE
HIALEAH, FL 33012 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: JUAN SILES

09/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVD () Delete
Name: SILES, JUAN
Address: 452 W. 40TH PLACE
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: SILES, CARMEN
Address: 452 W. 40TH PLACE
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: TOLEDO-MARRERO, JOSE
Address: 452 W. 40TH PLACE
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN SILES

PRES

09/29/2009

Electronic Signature of Signing Officer or Director

Date