

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008
Secretary of State

DOCUMENT# N29504

Entity Name: SUNRISE OPPORTUNITIES, INC.

Current Principal Place of Business:

9040 SUNSET DRIVE
SUITE A
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

C/O LESLIE W. LEECH, JR
9040 SUNSET DR, SUITE A
MIAMI, FL 33173 US

New Mailing Address:

FEI Number: 65-0118734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEECH, LESLIE W JR.
9040 SUNSET DRIVE
SUITE A
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: YOUNG, PAULINE A
Address: 12805 SW 103 COURT
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: TUCKER, GERALDINE
Address: 8100 SW 133RD COURT
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: COSBY, ED
Address: 5780 SW15 STREET
City-St-Zip: PLANTATION, FL 33317

Title: P () Delete
Name: LEECH, LESLIE W JR.
Address: 9040 SUNSET DRIVE, SUITE A
City-St-Zip: MIAMI, FL 33173

Title: D (X) Delete
Name: SOUTO, JOSE E
Address: 5605 NW 82 AVE
City-St-Zip: MIAMI, FL 33166

Title: ST () Delete
Name: WEEKS, JAMES G
Address: 9040 SUNSET DR
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: WYCOFF, MARILYN
Address: 4208 SW 138TH PLACE
City-St-Zip: MIAMI, FL 33175

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: LESLIE W. LEECH, JR

PRES

02/04/2008

Electronic Signature of Signing Officer or Director

_____ Date