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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2002 8:00 am
Secretary of State
05-13-2002 90164 029 ***158.75

DOCUMENT # P00000036564

1. Entity Name

Sunshine Construction Supply, Inc.

34020

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7102 S.W. 44th Street	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Florida	City & State
Zip: 33155 Country: USA	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1085172 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Gladys Alvarez

Street Address (P.O. Box Number is Not Acceptable): 12751 SW 43rd Drive

City: Miami FL Zip Code: 33175

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

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD
NAME	Carlos Marquez
STREET ADDRESS	8811 S.W. 108th Street
CITY-ST-ZIP	Miami, Fl 33176
TITLE	VSD
NAME	Barbara Marquez
STREET ADDRESS	8811 S.W. 108th Street
CITY-ST-ZIP	Miami, Fl 33176
TITLE	S
NAME	Gladys Alvarez
STREET ADDRESS	12751 SW 43rd Dr.
CITY-ST-ZIP	Miami, Fl 33175
TITLE	
NAME	
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CITY-ST-ZIP	

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Gladys Alvarez Gladys Alvarez 4/29/02 305-220-8200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #