

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000042956

Entity Name: SUNRISE COLLISION INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

1384 NW 65 WAY
PLANTATION, FL 33313

New Principal Place of Business:

Current Mailing Address:

1384 NW 65 WAY
PLANTATION, FL 33313

New Mailing Address:

FEI Number: 65-1008627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIVES, JOE
15706 77 PLACE NORTH
LOXAHATCHEE, FL 33470 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VIVES, JOE
Address: 15706 77 PLACE NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE VIVES

PD

04/30/2005

Electronic Signature of Signing Officer or Director

Date