


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 11, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000049392</b> 1. Entity Name <b>SUNSET GENERAL SERVICES, INC.</b>	
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Principal Place of Business <b>13370 SW 143 TERR MIAMI, FL 33186</b>	Mailing Address <b>13370 SW 143 TERR MIAMI, FL 33186</b>
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**DO NOT WRITE IN THIS SPACE**

08022005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-1008549</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**RUIZ, JAIME  
13370 SW 143 TERR.  
MIAMI, FL 33186**

**DO NOT WRITE  
IN THIS SPACE**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

**U000000376173  
08/11/05-80004-006 150.00**

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

**9. Election Campaign Financing  
Trust Fund Contribution.**

☐ **\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUIZ, JAIME A 13370 SW 143 TERR MIAMI, FL 33186
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**DO NOT WRITE  
IN THIS SPACE**

**12.** I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:**

**JAIME A. RUIZ**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #