


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 08:00 A
Secretary of State

DOCUMENT # P01000044619
 1. Entity Name
 SUNSHINE COMMUNICATIONS S.E., INC.



Principal Place of Business
 1019 SYMPHONY ISLES BLVD
 APOLLO BEACH, FL 33572 US

Mailing Address
 P.O. BOX 3509
 APOLLO BEACH, FL 33572



DO NOT WRITE IN THIS SPACE

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number
 58-2628470

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

OGRODOWSKI, RICHARD
 1019 SYMPHONY ISLES BLVD
 APOLLO BEACH, FL 33572

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD STRAUB, ROBERT 1445 JUMANA LOOP APOLLO BEACH, FL 33572
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD OGRODOWSKI, RICHARD J 1019 SYMPHONY ISLES BLVD APOLLO BEACH, FL 33572
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Robert Straub Date: 1/9/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR