## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED Sep 11, 2002 8:00 am Secretary of State 09-11-2002 90108 001 \*\*\*150.00

Daytime Phone #

DOCUMENT #  1. Entity Name			09-11-2002 90108 001 ***150.00 09-11-2002 90108 002 *****8.75
SUNDHINE MORTGAGES INVESTMENTS, INC			
DO NOT WRITE	IN THIS SP	ACE	
2. Principal Place of Business 45 AUE	3. Mailing Address 4422 SEF	GORDE	99092
Suite, Apt. #, etc.	Suite, Apt. #, etc.	CKHYB	DO NOT WRITE IN THIS SPACE
City & State	City & State	THESEAF	4. FEI Number Applied For Not Applicable
Zip Country	ו מול ו	SRUAR!	5. Certificate of Status Desired \$8.75 Additional Fee Required
		Name I	7. Name and Address of Current Registered Agent
DO NOT WIDITE HEATHER E. ZEILER			
IN THIS SPACE  Street Address (P.O. Box Number is Not Acceptable)  H422 SEA GRADE DR			
		City	WALE BY HE SEA FL 33308
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 Head of printed upone of registered apply and talls if applicable (NOTE: Registered Agent signature required when reinstating)  Date  On the control of the contr			
9. This corporation is eligible to satisfy its Intangible January 1 - May 1 - Fee is \$150.00			
Tax filing requirement and elects to do so.  (See criteria on back)  Make Check Payable to Department of State:    Contribution   Contributio			
11. 4 OFFICERS AND			
NAME HEATHERE EZE	lleiL	NAME	
STREET ADDRESS 4422 SCA GN CITY-ST-ZIP LAUDERDELE BY	ADE DR.	STREET ADDRESS *	
THLE	33308	THE	
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TITLE		TITLE	IN THIS SPACE
STREET ADDRESS		STREET ADDRESS	
CHY-SI-ZIP		CUY-SI-ZIP	
TITLE NAME		TITLE NAME	
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NAME.		NAME	The state of the s
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
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.			

attachment

September 10, 2002

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500 800-488-9000

Please note Sunshine Mortgage & Investments, Inc did not receive Uniform Business Report. Currently, you records indicate incorrect address. I am requesting for penalties to please be waived.

Please note change of address:

4422 Sea Grape Dr Lauderdale By The Sea, FL 33308

Sincerely,

Heather Teller