

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 8:00 am
Secretary of State

03-20-2006 90015 012 ***150.00

DOCUMENT # P01000072244

1. Entity Name
FLORIDA SUNSHINE PROPERTIES, INC.



Principal Place of Business
12640 SW 77 AVE
MIAMI, FL 33156

Mailing Address
12640 SW 77 AVE
MIAMI, FL 33156



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02222006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

52-2332075

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERK, HOWARD
501 GRANADA AVENUE
VENICE, FL 34285

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME ~~D-~~
STREET ADDRESS ~~BERK, ANNIE~~
CITY-ST-ZIP ~~2200 SOUTHWEST US 7 SUITE 704~~
~~MIAMI, FL 33133~~

TITLE ☒ Delete
NAME ~~D~~
STREET ADDRESS ~~BERK, MARY~~
CITY-ST-ZIP ~~810 SAN MARCO AVENUE~~
~~NORTH PORT, FL 34287~~

TITLE ☐ Delete
NAME ~~DELETED~~
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME ~~DIRECTOR/PRESIDENT~~
STREET ADDRESS ~~ANNIE BERK~~
CITY-ST-ZIP ~~12640 S.W. 77TH AVE~~
~~MIAMI FL 33156~~

TITLE ☒ Change ☐ Addition
NAME ~~DIRECTOR~~
STREET ADDRESS ~~HOWARD BERK~~
CITY-ST-ZIP ~~12640 S.W. 77TH AVE~~
~~MIAMI FL 33156~~

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 lkg empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-06

Date

305 215 0012

Daytime Phone #