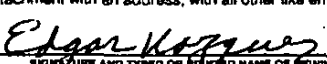


2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
6/14/2005-90001-037-\$150.75-\$158.75
FILED

05 JUN 23 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000110889					
1. Entity Name SUNRISE TRANSPORTATION CORPORATION					
Principal Place of Business 9737 E. HWY. 92 TAMPA, FL 33610			Mailing Address 9737 E. HWY. 92 TAMPA, FL 33610		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3758683	
				Applied For Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				06112005 Chg-P CR2E034 (10/03) u	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
VAZQUEZ, GENARO 9737 E. HWY. 92 TAMPA, FL 33610			Name EDGARD VAZQUEZ		
			Street Address (P.O. Box Number is Not Acceptable)		
			9737 E. Hwy. 92		
			City TAMPA FL Zip Code 33610		
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  EDGARD VAZQUEZ 6/11/2005 Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD VAZQUEZ, GENARO 9737 E. HWY. 92 TAMPA, FL 33610	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT & DIRECTOR EDGARD VAZQUEZ 9737 E. HWY. 92 TAMPA, FL. 33610	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD VAZQUEZ, EDGARD 9737 E. HWY. 92 TAMPA, FL 33610	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PR	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	200056606652 06/28/05--01029--013 **391.25	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  EDGARD VAZQUEZ - President 6/11/2005 417-264 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					