

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121128

**FILED**  
**Jan 23, 2004**  
**Secretary of State**

**Entity Name:** SUNSHINE COMPLETE PAINTING IMPROVEMENTS, INC.

**Current Principal Place of Business:**

3901 S OCEAN DRIVE  
NO 6N  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

1835 E. HALLANDALE BEACH BLVD.  
NO. 485  
HALLANDALE, FL 33009

**Current Mailing Address:**

3901 S OCEAN DRIVE  
NO 6N  
HOLLYWOOD, FL 33019

**New Mailing Address:**

1835 E. HALLANDALE BEACH BLVD.  
NO. 485  
HALLANDALE, FL 33009

**FEI Number:** 30-0023269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONTRERAS, ANTONIO  
3901 S OCEAN DRIVE  
NO 6N  
HOLLYWOOD, FL 33019

**Name and Address of New Registered Agent:**

RIVAS GONZALEZ, IMPERIO  
1835 E. HALLANDALE BEACH BLVD.  
NO. 485  
HALLANDALE, FL 33009

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: IMPERIO RIVAS GONZALEZ

01/23/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RIVAS-GONZALEZ, RIVAS  
Address: 3901 S. OCEAN DR., #6-N  
City-St-Zip: HOLLYWOOD, FL 33019

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: RIVAS GONZALEZ, IMPERIO  
Address: 1835 E. HALLANDALE BEACH BLVD. # 485  
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IMPERIO RIVAS GONZALEZ

PD

01/23/2004

Electronic Signature of Signing Officer or Director

Date