

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121128

FILED  
Apr 29, 2006  
Secretary of State

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

**Current Principal Place of Business:**

1039 BLUEWOOD TERRACE  
WESTON, FL 33327

**New Principal Place of Business:**

**Current Mailing Address:**

1039 BLUEWOOD TERRACE  
WESTON, FL 33327

**New Mailing Address:**

**FEI Number:** 30-0023269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVAS GONZALEZ, IMPERIO  
1039 BLUEWOOD TERRACE  
WESTON, FL 33327 US

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

CONTRERAS, ANTONIO J  
1039 BLUEWOOD TERRACE  
WESTON, FL 33327 US

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: ANTONIO CONTRERAS

04/29/2006

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: RIVAS GONZALEZ, IMPERIO  
Address: 1039 BLUEWOOD TERRACE  
City-St-Zip: WESTON, FL 33327

Title: P ( ) Delete  
Name: CONTRERAS, ANTONIO  
Address: 1039 BLUEWOOD TERRACE  
City-St-Zip: WESTON, FL 33327

Title: SEC ( ) Delete  
Name: CONTRERAS, CARMEN N  
Address: 1039 BLUEWOOD TERRACE  
City-St-Zip: WESTON, FL 33327

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: CONTRERAS, ANTONIO J  
Address: 1039 BLUEWOOD TERRACE  
City-St-Zip: WESTON, FL 33327

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ANTONIO CONTRERAS

P

04/29/2006

Electronic Signature of Signing Officer or Director

Date