

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121128

FILED  
Apr 30, 2012  
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:**

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

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CONTRERAS, ANTONIO J  
Address: 1039 BLUEWOOD TERRACE  
City-St-Zip: WESTON, FL 33327 US

Title: VP  
Name: CONTRERAS, CARMEN N  
Address: 1039 BLUEWOOD TERRACE  
City-St-Zip: WESTON, FL 33327 US

Title: CFO  
Name: RIVAS GONZALEZ, IMPERIO  
Address: 1039 BLUEWOOD TERRACE  
City-St-Zip: WESTON, FL 33327 US

Title: MGR  
Name: CONTRERAS, HECTOR A  
Address: 1039 BLUEWOOD TERR  
City-St-Zip: WESTON, FL 33327

I hereby 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 all other like empowered.

SIGNATURE: CARMEN CONTRERAS

VP

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date