## 2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000036598

Entity Name: SUNNY ISLES BEACH HOLDING CORP.

FILED Sep 04, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16445 COLLINS AVE. 17780 COLLINS AVENUE

APT. 1122 2ND FLOOR

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

16445 COLLINS AVE. 17780 COLLINS AVENUE

APT. 1122 2ND FLOOR

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

FEI Number: 04-3655986 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FUSCO, ALEXANDER

16445 COLLINS AVE. APT. 1122

17780 COLLINS AVENUE

SUITE B 2ND FLOOR

SUNNY ISLES BEACH, FL 33160 US SUNNY ISLES BEACH, FL 33160 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: WILLIAM J LILLYCROP 09/04/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: CFO

Name: LILLYCROP, WILLIAM J

Address: 1770 COLLINS AVENUE, 2ND FLOOR City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: EVP

 Name:
 LIEB, JAMES M

 Address:
 4 STAGECOACH RUN

 City-St-Zip:
 EAST BRUNSWICK, NJ 08816

Title: AS

 Name:
 TORPEY, CARITE L

 Address:
 4 STAGECOACH RUN

 City-St-Zip:
 EAST BRUNSWICK, NJ 08816

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: WILLIAM J LILLYCROP CFO 09/04/2012