2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000042539

1. Entity Name
PC'S@SUNSET, INC.

FILED
07 SEP 19 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
6290 S.W. 29TH STREET MIAMI, FL 33155	6290 S.W. 29TH STREET MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

08302007 No Chg-P CR2E034 (11/05)

4. FEI Number
02-0615065

Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RICHARD J. CALDWELL, P.A.
2600 DOUGLAS ROAD STE 1108
CORAL GABLES, FL 33134

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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 ______________________________

FILE NOW!!! FEE IS $150.00
Due by September 14, 2007

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

TITLE	DPT
NAME	CONSUEGRA, JOSEPH M
STREET ADDRESS	6290 S.W. 29TH STREET
CITY ST ZIP	MIAMI, FL 33155
TITLE	S
NAME	CONSUEGRA, SYLVIA
STREET ADDRESS	6290 S 29TH ST
CITY ST ZIP	MIAMI, FL 33155
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

S00109660689
09/19/07--01048--011 **150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Joseph Consuegra 9/1/07 President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

Joseph Consuegra