2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2007
Secretary of State

DOCUMENT# P02000069059

Entity Name: SUN TROPICAL PARTIES, INC.

Current Principal Place of Business:

14333-22 BEACH BLVD
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

14333-22 BEACH BLVD
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 03-0501634 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ALFONSO, CONSTANZA
14333-22 BEACH BLVD
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

ALFONSO, WILLIAM
14333-22 BEACH BLVD
JACKSONVILLE BEACH, FL 32250 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 ALFONSO 05/30/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALFONSO, CONSTANZA
Address: 5715 HAVEN RD
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP ( ) Delete
Name: ALFONSO, WILLIAM
Address: 5715 HAVEN RD
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALFONSO, WILLIAM
Address: 14333-22 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32250

Title: VP (X) Change ( ) Addition
Name: ALFONSO, CONSTANZA
Address: 14333-22 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32250

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM ALFONSO P 05/30/2007
Electronic Signature of Signing Officer or Director Date