

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081024

Entity Name: SUNRISE GOLDEN, INC.

FILED
Apr 07, 2004
Secretary of State

Current Principal Place of Business:

240 CRANDON BOULEVARD
SUITE 209
KEY BISCAYNE, FL 33149

New Principal Place of Business:

8325 NW 66 STREET
MIAMI, FL 33166

Current Mailing Address:

240 CRANDON BOULEVARD
SUITE 209
KEY BISCAYNE, FL 33149

New Mailing Address:

8201 NW 66 STREET
SUITE 3
MIAMI, FL 33166

FEI Number: 55-0788127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTO PACCA DO AMARAL, JR.
240 CRANDON BOULEVARD
SUITE 209
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

ROBERTO PACCA DO AMARAL, JR.
8325 NW 66 STREET
MIAMI, FL 33166 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: ROBERTO P. DO AMARAL

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: ROBERTO PACCA DO AMA, RAL, JR.
Address: 240 CRANDON BOULEVARD #209
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D (X) Delete
Name: ROBERTO PACCA DO AMA, RAL, JR.
Address: 240 CRANDON BOULEVARD #209
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: ROBERTO PACCA DO AMA, RAL, JR.
Address: 8325 NW 66 STREET
City-St-Zip: MIAMI, FL 33166

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 Section 119.07(3)(i), 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: ROBERTO P. DO AMARAL

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04/07/2004

Electronic Signature of Signing Officer or Director

Date