2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000116459

City-St-Zip:

JACKSONVILLE, FL 32246

FILED Apr 30, 2009 Secretary of State

Entity Name: SUNRISE CAFE OF JACKSONVILLE INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6999-01 ME JACKSON\	ERRILL RD /ILLE, FL 32246		6999-01 MERRILL RD JACKSONVILLE, FL		
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
6999-01 ME JACKSON\	ERRILL RD /ILLE, FL 32246				
FEI Number:	52-2384792 F	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
LASTELO, JASON 6999-01 MERRILL RD JACKSONVILLE, FL 32210 US				CASTELO, JASON 6999-01 MERRILL RD JACKSONVILLE, FL 32210 US	
The above in the State		mits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: JASON CASTELO				04/30/2009	
	Electronic	Signature of Registered Agen	t	Date	
Election Carr	npaign Financing Tr	ust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () De CASTELO, ANTONI 6999-01 MERRILL JACKSONVILLE, F	O RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () De CASTELO, JASON 6999-01 MERRILL JACKSONVILLE, F	RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TD () De CASTELO, MARIA 6999-01 MERRILL		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JASON CASTELO VD04/30/2009