

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90325 049 ***150.00

DOCUMENT # P02000119666

1. Entity Name
SUNSHINE STATE INTERIORS SYSTEMS, INC.



Principal Place of Business

**2 BRAIN LN
PALM COAST, FL 32137**

Mailing Address

**2 BRAIN LN
PALM COAST, FL 32137**

2. Principal Place of Business

2 BRIAN LANE

3. Mailing Address

2 BRIAN LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM COAST, FL

City & State

PALM COAST, FL

Zip

32137

Country

USA

Zip

32137

Country

USA

03312004

Chg-P

CR2E034 (10/03)

4. FEI Number

01-0749947

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KNIGHT, JERRY C
2825 N OCEAN SHORE BLVD
P.O. BOX 1258
FLAGLER BEACH, FL 32136**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME VEILLEUX, CARL L
STREET ADDRESS 2 BRAIN LN
CITY-ST-ZIP PALM COAST, FL 32137

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDT ☒ Change ☐ Addition
NAME
STREET ADDRESS 2 BRIAN LANE
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME ANNA VEILLEUX
STREET ADDRESS 2 BRIAN LANE
CITY-ST-ZIP PALM COAST, FL 32137

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Carl L. Veilleux

CARL L. VEILLEUX

03-31-04

386246-4293

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #