

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023967

FILED  
Sep 08, 2005  
Secretary of State

Entity Name: SUNSHINE FINANCIAL CORP.

## Current Principal Place of Business:

407 LINCOLN RD.  
9K  
MIAMI BEACH, FL 33139

## Current Mailing Address:

407 LINCOLN RD.  
9K  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

407 LINCOLN RD.  
8L  
MIAMI BEACH, FL 33139

## New Mailing Address:

407 LINCOLN RD.  
8L  
MIAMI BEACH, FL 33139

FEI Number: 14-1874725

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONZON, ARCHNA  
4501 ROYAL PALM AVENUE  
MIAMI BEACH, FL 33140 US

## Name and Address of New Registered Agent:

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:

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: PVST ( ) Delete  
Name: MONZON, ARCHNA  
Address: 4501 ROYAL PALM AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete  
Name: MONZON, ARCHNA  
Address: 4501 ROYAL PALM AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ARCHNA MONZON

PVST

09/08/2005

Electronic Signature of Signing Officer or Director

Date