P03000040384

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200061937572

12/09/05--01010--013 **35.00

05 DEC -9 M 9: 39
SECRETARY OF STATE
TALLAHASSEE FLORINA



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Sunrise Fantasy Fli	ghts Inc. (Name of Corporation)
DOCUMENT NUMBER: P0300004	0384
The enclosed Statement of Change of Reg	gistered Office/Agent and fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Dave Gardner	(Name of Contact Person)
Sunrise Fantasy	Flights Inc. (Firm/Company)
8710 W. Hillsbore	ough Ave. #189 (Address)
Tampa, FL 33615	(City/State and Zip Code)
For further information concerning this m	atter, please call:
Dave Gardner (Name of Contact Person)	at (813) 969-1518 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable	to the Department of State.
Mailing Address Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	porations Division of Corporations Clifton Building

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: Sunrise Fantasy Flights, Inc.		
2. The principal office address: 8710 W. Hillsborough Ave. #189		
Tampa, FL 33615		
3. The mailing address (if different): same as above		
4. Date of incorporation/qualification: 4-04-03 Document number: P03000040384		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:		
Dave Gardner		
11266 W. HILLSBOROUGH AVE. #157		
TAMPA, FL 33635		
6. The name and street address of the new registered agent (if changed) and /or registered office T (if changed):		
Dave Gardner SEC ■ D		
8102 Sheldon Rd. #1104		
Tampa, FL 33615		
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so after a comportation has been notified in writing of the change.		
Dave Gardner President (Stightature of an officer or director) Dave Gardner President		
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the dorporation has been notified in writing of this change. 12/6/05 (Signature of Registered Agent)		
If signing on behalf of an entity:		
(Typed or Printed Name)		

* * * FILING FEE: \$35.00 * * *