

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128066

Entity Name: NEW SUNSHINE TRADING, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

9612 SW 117 AVE
MIAMI, FL 33186

New Principal Place of Business:

2290 NW 20TH ST
MIAMI, FL 33142

Current Mailing Address:

9612 SW 117 AVE
MIAMI, FL 33186

New Mailing Address:

2290 NW 20TH ST
MIAMI, FL 33142

FEI Number: 01-0801680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAHIMULLAH, MOHAMMED
9612 SW 117 AVE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

AHMED, ASHFAQUE
9404 SW 12TH PL
MIAMI, FL 33186 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: ASHFAQUE AHMED

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZAFAR, SYED F
Address: 9705 SW 95 AVE
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: MOHAMMED, SYED
Address: 9380 NW 37 MANOR
City-St-Zip: SUNRISE, FL 33351

Title: D (X) Delete
Name: FAHIMULLAH, MOHAMMED
Address: 9612 SW 117 AVE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AHMED, ASHFAQUE
Address: 9404 SW 125TH PL
City-St-Zip: MIAMI, FL 33186

Title: VP (X) Change () Addition
Name: SHAKIR, MOHAMMED Z
Address: 8101 SW 204TH STREET
City-St-Zip: MIAMI, FL 33189

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 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.

SIGNATURE: ASHFAQUE AHMED

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date