2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000005871

Entity Name: SUN REAL ESTATE SOLUTIONS, INC.

FILED Jun 13, 2006 Secretary of State

LINITY NAME. 3010 REAL ESTATE 30EUTIONS, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
6880 SW 3RD STREET PEMBROKE PINES, FL 33023				8551 W. SUNRISE BLVD. STE. 302 PLANTATION, FL 33322			
Current Mailing Address:				New Mailing Address:			
6880 SW 3RD STREET PEMBROKE PINES, FL 33023				8551 W. SUNRISE BLVD. STE. 302 PLANTATION, FL 33322			
FEI Number: 2	20-0612409	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Statu	us Desired()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							Agent:
MUMMERT, MICHAEL E 8551 W SUNRISE BLVD STE 302 PLANTATION, FL 33322 US							
The above r in the State		ubmits this statement for the pu	rpose o	f changing it	s registered of	ffice or registered	l agent, or both,
SIGNATUR							
Electronic Signature of Registered Agent				Date			
		(2)(b), F.S., the corporation did not r Trust Fund Contribution ().	receive t	he prior notice).		
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$			
Title: Name: Address: City-St-Zip:	D () [MUMMERT, AMY 6880 SW 3RD S' PEMBROKE PIN	TREET		Title: Name: Address: City-St-Zip:	MUMMERT, AM	ISE BLVD., STE. 302	
Title: Name: Address: City-St-Zip:	D ()[ASHBY, MELIND 6880 SW 3RD S PEMBROKE PIN	TREET		Title: Name: Address: City-St-Zip:	ASHBY, MELINI	ISE BLVD., STE. 302	
Title: Name: Address: City-St-Zip:	MUMMERT, MICH	IRISE BLVD., STE. 302		Title: Name: Address: City-St-Zip:	()	Change () Addition	1
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	ASHBY, BRAND	ISE BLVD., STE. 302	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	MUMMERT, LAU	ISE BLVD., STE. 302	

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: MICHAEL E. MUMMERT PSD 06/13/2006