2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000014006



FILED Apr 25, 2008 8:00 am Secretary of State

SUNSTRI	I. Entity Name SUNSTREAM BUILDING ENTERPRISES AND CONSULTING, INC.							04-25-2008 90150 002 ***150.00				
Principal Place of Business			Mailing Address	Mailing Address								
13664 48TH			•	13664 48TH COURT NORTH								
ROYAL PALM				ROYAL PALM BEACH, FL 33411				•				
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Principal Place of Business - No P.O. Box # 3. Mailing Address												
			P.O. BOX 210546				1 1 2 3 7 4 7 1		,,,,, ,,,,,		11561 11 1461	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			01172008	Chg-P	CR2E0	34 (12/06)		
City & State	e		City & State WEST PALM BRACH Zip Country			′.	4. FEI Numbe 51-049			No	plied For ot Applicable	
Žip		Country	3241/- 15-41	ntry • C	1	5. Certificate	of Status Desired		\$8.75 Add	iltional		
** ***	6. Name	and Address of Current	Registered Agent	1 4	. <u></u>		7. Name and	Address of New I		•		
					Name		•					
BESSETTE, DENNIS A						ress /P	O. Box Numbe	er is Not Acceptable	(a)			
13664 48TH COURT NORTH Street Addr. ROYAL PALM BEACH, FL 33411							. O. DOX (IGHI)	- TO TO TO COPIED				
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		•			City		· · · · · · · · · · · · · · · · · · ·		FL	Zip Cod	е	
8. The above the obligati	named entity ions of regist	y submits this statement for ered agent.	r the purpose of changing it	s register	ed office or re	gistere	d agent, or bot	th, in the State of Fl	orida. I am i	amiliar with,	and accept	
SIGNATURE_		or printed name of registered agent	and life if applicable. (NC	TE: Becrister	ed Agent signature i	regulated w	then rematetors)		DATE			
			1									
After Ma		FEE IS \$150.00 3 Fee will be \$550.				\$5.0 Added	00 May Be d to Fees					
10.	Y	OFFICERS AND		11.			ADDITIONS/	CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11	
TITLE NAME	PSTD	E DENINIC A	☐ Delete	пπ						☐ Change	☐ Addition	
STREET ADORESS	BESSETTE, DENNIS A 13664 48TH COURT NORTH			NAA STD:	EET ADDRESS						1	
CITY-ST-ZIP		ALM BEACH, FL 3341	1		r-ST-ZIP							
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NAME		•		NAM	1							
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CITY-ST-ZIP	<u> </u>		·		'-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.												
SIGNAT	IIRF.	1/1100	all most	#			41	23/08	101	2000.	YESS	
JIGHAL	JINE:	SOMETONE MIN TIPED OR	RINTED NAME OF BIGNING OFFICE	R OR DIREC	TOR			Date	C JOS	aytime Phone #	1007	