2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 27, 2006 08:00 AN Secretary of State DOCUMENT # P04000034126 EDDIE'S SUNSHINE CAFE INC. Principal Place of Business Mailing Address 9516 CORTEZ ROAD WEST 9516 CORTEZ ROAD WEST BRADENTON, FL 34209 BRADENTON, FL 34209 04182006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 86-1097448 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JACKMAN, JAMES D DO NOT WRITE 5008 MANATEE AVE WEST. SUITE 1 IN THIS SPACE BRADENTON, FL 34209 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS P/D TITLE RYAN, EDWARD JR. NAME STREET ADDRESS 9516 CORTEZ ROAD WEST U00000539779 05/09/06-80112-025 150.00 CITY-ST-ZIP BRADENTON, FL 34209 TITLE RYAN, EDWARD JR. 9516 CORTEZ ROAD WEST STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THILE

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 channel, or on an attachment with an address, with all directlike amortivered. changed, or on an attachment with an address

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

OR DIRECTOR