


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000065463 1. Entity Name SUNSHINE ADELPHIA ELECTRICAL AND ALARM CONTRACTORS, INC	
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Principal Place of Business 13380 SW 128 ST MIAMI, FL 33186	Mailing Address 13380 SW 128 ST MIAMI, FL 33186
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DO NOT WRITE IN THIS SPACE



03302007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1692861	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**VELAZCO, TERESA
13453 SW 62 ST #1
MIAMI, FL 33183**

**DO NOT WRITE
IN THIS SPACE**

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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SANTISTEBAN, MARIANO J 1300 S.W. 85TH CT. MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VELAZCO, MARIO 13453 SW 62 ST #1 MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VELAZCO, TERESA 13453 SW 62 ST #1 MIAMI, FL 33183
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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04/06/07-80059-021 150.00

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.

SIGNATURE:  **MARIO VELAZCO** 03-25-07 (305) 969-3969
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #