

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091449

FILED
Mar 18, 2008
Secretary of State

Entity Name: SUNRISE HAULING & EXCAVATING, INC.

Current Principal Place of Business:

2298 GRAND POPLAR ST
OCOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2298 GRAND POPLAR ST
OCOE, FL 34761

New Mailing Address:

FEI Number: 20-1243084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERSAUD, NAKERANIE
2298 GRAND POPLAR ST
OCOE, FL 34761 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PERSAUD, NAKERANIE PRESIDE
Address: 2298 GRAND POPLAR ST
City-St-Zip: OCOE, FL 34761

Title: VPD () Delete
Name: PERSAUD, DAVENAND VICE-PR
Address: 2298 GRAND POPLAR ST
City-St-Zip: OCOE, FL 34761

Title: CHM (X) Delete
Name: WATSON, ANDREW CHAIRMA
Address: 2298 GRAND POPLAR ST
City-St-Zip: OCOE, FL 34761

Title: ACH () Delete
Name: ROBERTS, CLINTON A.CHAIR
Address: 2298 GRAND POPLAR STREET
City-St-Zip: OCOE, FL 34761

Title: SEC (X) Delete
Name: ORTIZ, JOHN M SECRETA
Address: 2298 GRAND POPLAR STREET
City-St-Zip: OCOE, FL 34761

Title: AS (X) Delete
Name: WARREN, DALTON R
Address: 2298 GRAND POPLAR STREET
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NAKERANIE PERSAUD

PD

03/18/2008

Electronic Signature of Signing Officer or Director

Date