

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000103054

FILED
Sep 22, 2006
Secretary of State

Entity Name: SUNSITES INVESTMENT COMPANY

Current Principal Place of Business:

P.O. BOX 226663
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 226663
MIAMI, FL 33122

New Mailing Address:

FEI Number: 20-1364276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, HECTOR J
3922 N.E. 166TH ST # S-212
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

TORRES, HECTOR J
14400 LAKE CHILDS CT
MIAMI LAKES, FL 33014 US

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: HECTOR J TORRES

09/22/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TORRES, HECTOR J
Address: 3922 N.E. 166TH ST S-212
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TORRES, HECTOR J
Address: 14400 LAKE CHILDS CT
City-St-Zip: MIAMI LAKES, FL 33014

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: HECTOR J TORRES

PD

09/22/2006

Electronic Signature of Signing Officer or Director

Date