## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000114357

Entity Name: SUNSET TINT & TRIM, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5040 MITZI LANE 8231 SYCAMORE DRIVE

HOLIDAY, FL 34690 US NEW PORT RICHEY, FL 34654 US

Current Mailing Address: New Mailing Address:

9300 REGENCY PARK BOULEVARD PORT RICHEY, FL 346685023 US

FEI Number: 20-1458856 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HENNESSY FINANCIAL GROUP, INC.
9300 REGENCY PARK BOULEVARD
PORT RICHEY, FL 346685023 US

CHIASSON, BEKKI
8231 SYCAMORE DRIVE
NEW PORT RICHEY, FL 34654 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: BEKKI CHIASSON 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 CHIASSON, BEKKI S
 Name:
 CHIASSON, BEKKI S

 Address:
 5040 MITZI LANE
 Address:
 8231 SYCAMORE DRIVE

City-St-Zip: HOLIDAY, FL 34690 US City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: S ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 CHIASSON, MICHAEL R
 Name:
 CHIASSON, MICHAEL R

 Address:
 5040 MITZI LANE
 Address:
 8231 SYCAMORE DRIVE

City-St-Zip: HOLIDAY, FL 34690 US City-St-Zip: NEW PORT RICHEY, FL 34654 US

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: BEKKI CHIASSON P 04/28/2006