
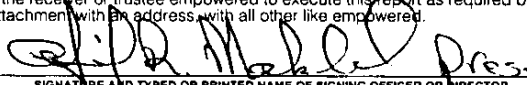


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Sep 10, 2007 8:00 am**  
**Secretary of State**

09-10-2007 90002 006 \*\*\*158.75

DOCUMENT # P04000140415			
1. Entity Name SUNSHINE LIQUIDATORS, INC.			
Principal Place of Business 2509 NORTH DIXIE HWY WEST PALM BEACH, FL 33407 US		Mailing Address 2509 NORTH DIXIE HWY WEST PALM BEACH, FL 33407 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		08292007	Chg-P CR2E034 (12/06)
		4. FEI Number 34-2024347	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MAKBOUL, ALFIE R <del>2509 NORTH DIXIE HWY</del> WEST PALM BEACH, FL 33407		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAKBOUL, ALFIE R <del>2509 NORTH DIXIE HWY</del> WEST PALM BEACH, FL 33407 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 432 25 <sup>th</sup> ST WPB FL 33407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  Pres.		Date: 9/6/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

ATTACHMENT  
40131845

Afif R Makboul  
432 25<sup>TH</sup> St.  
West Palm Beach, FL 33407

Florida Dept. of State  
Divisions of Corporations

Re: Alfie's Bar & Restaurant Equipment # S45673  
Liamar Inc #P97000016454  
Sunshine #P04000140415

September 7, 2007

To Whomever It May Concern:

I am enclosing (3) checks for the filing of the annual report for the above (3) Corporations. The mail was going to 2509 No. Dixie Hwy, WPB, FL 33407 which has been unoccupied for some time now due to the destruction of the building that occurred during last hurricane season. I have been in contact with the Florida Dept of State to send the mail to : 432 25<sup>th</sup> St. WPB, FL 33407. I had spoken to someone in the office quite some time ago regarding not receiving the annual report and was told that they would remail them to the current address. I called again on 8/29/07 and spoke with Tina D Carter, Document Specialist (Letter Attached) and explained that I still did not receive the forms. She did say that she would resend me the forms and that the State Department would excuse me the late charges.

Sincerely,

Afif R Makboul