2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155289

Entity Name: SUN LAND INDIA CORP

MEJIA, ARMANDO R

MIAMI, FL 33018

8712 NW 170TH TERR

() Delete

Name:

Title:

Name: Address:

Address:

City-St-Zip:

City-St-Zip:

FILED Mar 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7270 NW 12TH ST SUITE 760 MIAMI, FL 33126 **New Mailing Address: Current Mailing Address:** 7270 NW 12TH ST SUITE 760 MIAMI, FL 33126 FEI Number: 20-2446042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MEJIA, JOSE D PEREZ, COSME E 7270 NW 12TH ST 160 12TH AVENUE NE SUITE 760 NAPLES, FL 34120 MIAMI, FL 33126 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: COSME E PEREZ 03/07/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MEJIA, JOSE D MEJIA, JOSE D Name: Name: 1214 NW 137TH TERR 18740 NW 3RD STREET Address: Address: City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: PEMBROKE PINES, FL 33029 Title: Title: (X) Change () Addition () Delete ADAMES, FRAYLA E ADAMES, FRAYLA E Name: Name: 1214 NW 137TH TERR 18740 NW 3RD STREET Address: Address: PEMBROKE PINES, FL 33028 PEMBROKE PINES, FL 33029 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition VΡ () Delete VΡ

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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

MEJIA, ARMANDO R

MIAMI, FL 33166

MEJIA, LUIS D

8500 NW 66TH STREET

18740 NW 3RD STREET

PEMBROKE PINES, FL 33029

() Change (X) Addition

SIGNATURE: JOSE D MEJIA PD 03/07/2007