


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2006 8:00 am
Secretary of State

05-08-2006 90309 021 ***100.00
 06-21-2006 90001 019 ****50.00

DOCUMENT # P05000033526

1. Entity Name
SUN'S IMAGE PICTURE, INC.



Principal Place of Business
**2601 NW 5TH AVENUE
 2ND FLOOR
 MIAMI, FL 33127**

Mailing Address
**2601 NW 5TH AVENUE
 2ND FLOOR
 MIAMI, FL 33127**

40096432



2. Principal Place of Business
3015 NW 79th Street

3. Mailing Address
2750 NW 3rd Ave

Suite, Apt. #, etc.
D 45

Suite, Apt. #, etc.
19

City & State
Miami, FL

City & State
Miami, FL

Zip
33147

Country

Zip
33127

Country

04242006 Chg-P CR2E034 (11/05)

4. FEI Number
20-2488422

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CHOI, KEUN-YI
 953 CORAL CLUB DR.
 CORAL SPRINGS, FL 33071**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____

State **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 *Keun Yi Choi* DATE *4/26/06*

Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$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	PSD CHOI, KEUN-YI 953 CORAL CLUB DR. CORAL SPRINGS, FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Keun Yi Choi* DATE *4/26/06*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #