

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000065422

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: SUMFUN'S WHOLESALE PRODUCTS, INC.

## Current Principal Place of Business:

27 LAWRENCE LAKE DR.  
BOYNTON BEACH, FL 33436

## New Principal Place of Business:

1782 SW COMMARGO ST  
PORT SAINT LUCIE, FL 34987

## Current Mailing Address:

4121 PARKER AVE  
WEST PALM BCH, FL 33405

## New Mailing Address:

FEI Number: 55-0894654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONDO, JOSEPH G III  
27 LAWRENCE LAKES DR  
BOYNTON BEACH, FL 33436 US

## Name and Address of New Registered Agent:

MONDO, JOSEPH G III  
1782 SW COMMARGO ST  
PORT SAINT LUCIE, FL 34987 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: JOE MONDO

02/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: MR ( ) Delete  
Name: JOSEPH, MONDO G LLL  
Address: 27 LAWRENCE LAKE DR  
City-St-Zip: BOYNTON BEACH BLVD, FL 33436 US

Title: MR ( ) Delete  
Name: SHARP, BILLY R JR  
Address: 2710 DAYBREAK DR  
City-St-Zip: ORLANDO, FL 32825

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change ( ) Addition  
Name: JOSEPH, MONDO G LLL  
Address: 1782 SW COMMARGO ST  
City-St-Zip: PORT SAINT LUCIE, FL 34987 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOE MONDO

VP

02/25/2009

Electronic Signature of Signing Officer or Director

Date