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2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000070248

1. Entity Name
SUNSHINE TRAFFIC SCHOOL INC.

Principal Place of Business	Mailing Address
10006 NEWINGTON DR ORLANDO, FL 32836	PO BOX 691842 ORLANDO, FL 32869

DO NOT WRITE IN THIS SPACE

02222008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-2970689	Not Applicable

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

6. Name and Address of Current Registered Agent

ABASS, JAMEER
10006 NEWINGTON DR
ORLANDO, FL 32830

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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 _____

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

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	ABASS, JAMEER
STREET ADDRESS	10006 NEWINGTON DR
CITY-ST-ZIP	ORLANDO, FL 32836

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 02/23/08   407-362-0663

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