2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000085037

Entity Name: SUNRISE CHEVRON INC.

FILED May 01, 2006 Secretary of State

Littly Nai	ile. SONKISL	CHEVRON INC.			
Current Principal Place of Business:			New Principal Place of Business:		
10300 W C SUNRISE,	COMMERCIAL FL 33351	BLVD US			
Current Mailing Address:			New Mailing Address:		
10300 W C SUNRISE,	COMMERCIAL FL 33351	BLVD US			
FEI Number:	20-2987671	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of C	Surrent Registered Agent:	Name and	Address of New Registered Agent:	
	JLIS, PETER COMMERCIAL FL 33351	BLVD US			
	named entity : e of Florida.	submits this statement for the	purpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Ag	gent	Date	
		3(2)(b), F.S., the corporation did r	not receive the prior notic	ce.	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MAXAKOULIS, 12624 COLON	Delete THEODORA / PRESERVE DR. CH, FL 33436 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KARGER, WILI	RD C-8 SUITE 1084	Title: Name: Address: City-St-Zip:	DIR (X) Change () Addition MAXAKOULIS, WILLIAM 12632 COLONY PRESERVE DR. BOYNTON BEACH, FL 33436	
Title: Name: Address: City-St-Zip:	MAXAKOULIS, 12560 COLON	Delete PETER / PRESERVE DR CH, FL 33436 US	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MAXAKOULIS, PETER W. 12560 COLONY PRESERVE DR BOYNTON BEACH, FL 33436 US	
Title: Name: Address: City-St-Zip:	MAXAKOULIS, 12632 COLON	Delete THOMAS / PRESERVE DR CH, FL 33436 US	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MAXAKOULIS, THOMAS N. 12142 COLONY PRESERVE DR BOYNTON BEACH, FL 33436 US	
Title:	DIR (X) Delete	Title:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PETER W. MAXAKOULIS VP 05/01/2006

12632 COLONY PRESERVE DR

City-St-Zip: BOYNTON BEACH, FL 33436 US

Address: