

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000085037

Entity Name: SUNRISE CHEVRON INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

10300 W COMMERCIAL BLVD
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

10300 W COMMERCIAL BLVD
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: 20-2987671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAXAKOULIS, PETER
10300 W COMMERCIAL BLVD
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MAXAKOULIS, THEODORA
Address: 12624 COLONY PRESERVE DR.
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: DIR () Delete
Name: MAXAKOULIS, WILLIAM
Address: 12632 COLONY PRESERVE DR.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: MAXAKOULIS, PETER W.
Address: 12560 COLONY PRESERVE DR
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: VP () Delete
Name: MAXAKOULIS, THOMAS N.
Address: 12142 COLONY PRESERVE DR
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: PETER W. MAXAKOULIS

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date