
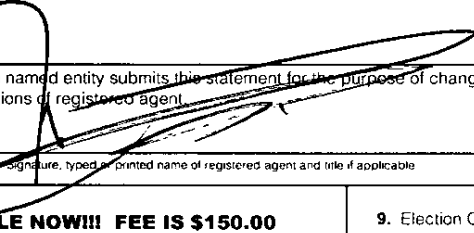
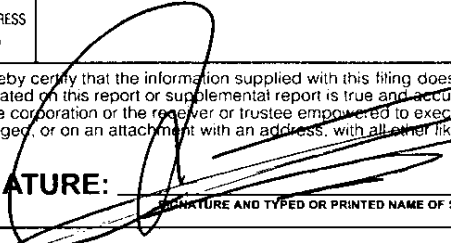


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006 8:00 am
Secretary of State

07-05-2006 90003 021 ***158.75

DOCUMENT # P05000100060					
1. Entity Name SUNRISE IMMIGRATION SERVICES, INC.					
Principal Place of Business 30 W. SUNRISE BLVD. FT LAUDERDALE, FL 33311 US			Mailing Address 30 W. SUNRISE BLVD. FT LAUDERDALE, FL 33311 US		
2. Principal Place of Business 2508 W. OAKLAND PARK BLVD Suite, Apt. #, etc.			3. Mailing Address SAME Suite, Apt. #, etc.		
City & State OAKLAND PARK, FL			City & State SAME		
Zip 33311		Country US		06292006 Chg-P CR2E034 (11/05)	
4. FEL Number 20-3190388				Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HONORE, MATHIAS M 30 W. SUNRISE BLVD FT LAUDERDALE, FL 33311			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City 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:  MATHIAS M. HONORE 06-30-06 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME HONORE, MATHIAS M STREET ADDRESS 30 W. SUNRISE BLVD. CITY-ST-ZIP FT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE P NAME HONORE, MATHIAS M STREET ADDRESS 30 W. SUNRISE BLVD. CITY-ST-ZIP FT LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME HONORE, DASHANA STREET ADDRESS 30 W. SUNRISE BLVD. CITY-ST-ZIP FT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE VP NAME HONORE, DASHANA STREET ADDRESS 30 W. SUNRISE BLVD. CITY-ST-ZIP FT LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME HONORE, MCNELLY STREET ADDRESS 30 W. SUNRISE BLVD. CITY-ST-ZIP FT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE D NAME HONORE, MCNELLY STREET ADDRESS 30 W. SUNRISE BLVD. CITY-ST-ZIP FT LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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	
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	
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: 			MATHIAS M. HONORE 06-30-06 <small>Signature and typed or printed name of signing officer or director</small>		

40097930.

