

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000110127

Entity Name: RAYOSHINE, INC.

FILED  
Apr 18, 2007  
Secretary of State

**Current Principal Place of Business:**

207 N PRIMROSE DR  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

N PRIMROSE DR  
207  
ORLANDO, FL 32803 US

**Current Mailing Address:**

767 BUTTERFLY CREEK DRIVE  
OCOOE, FL 34761 US

**New Mailing Address:**

BUTTERFLY CREEK DRIVE  
767  
OCOOE, FL 34761 US

FEI Number: 20-3676674

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COHN, SCOTT E ESQ.  
315 SE 7TH STREET  
2ND FLOOR  
FT. LAUDERDALE, FL 33301 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: P ( ) Delete  
Name: STILL, MARIA  
Address: 767 BUTTERFLY CREEK DRIVE  
City-St-Zip: OCOEE, FL 34261 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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.

SIGNATURE: MARIA STILL

P

04/18/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date