

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052102

Entity Name: SONSHINE CLEANERS, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

20340 NW 2ND AVE
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

20340 NW 2ND AVE
MIAMI, FL 33169

New Mailing Address:

FEI Number: 56-2575107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORBIN, DAVID
20340 NW 2ND AVE
MIAMI, FL 33169 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CORBIN, DAVID
Address: 1921 SW 125TH AVE
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: CORBIN, RHODA
Address: 1100 ST CHARLES PLACE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Delete
Name: CORBIN, LAUNA
Address: 1921 SW 125TH AVE
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: RILEY, FAITH
Address: 16347 NW 8TH DR
City-St-Zip: PEMBROKE PINES, FL 33028

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: DAVID CORBIN

D

05/01/2008

Electronic Signature of Signing Officer or Director

Date