2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000062436

Entity Name: SUNSHINE SQUARE MEDICAL GROUP, INC

FILED May 07, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
566 SE 15 BOYNTON	AV NBEACH, FL 33435			
Current Mailing Address:		New Mailing Address:		
566 SE 15 BOYNTON	AV I BEACH, FL 33435			
FEI Number:	: FEI Number Applied For	(X) FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		nt: Name and Address of N	Name and Address of New Registered Agent:	
The above	AÝ I BEACH, FL 33435 US	r the purpose of changing its registered o	ffice or registered agent, or both,	
SIGNATU				
	Electronic Signature of Registeronic Signature of Registeronics with s. 607.193(2)(b), F.S., the corporation paign Financing Trust Fund Contribution (n did not receive the prior notice.	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P,S () Delete BUCHWALD, ERIC 566 SE 15 AV BOYNTON BEACH, FL 33435	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete ROSEN, RICHARD DR 566 SE 15 AV BOYNTON BEACH, FL 33435	Title: () Name: Address: City-St-Zip:	Change () Addition	

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: ERIC BUCHWALD P 05/07/2007