

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000082708

FILED
Nov 13, 2007
Secretary of State

Entity Name: SUNSHINE HEALTHCARE CTR, INC.

Current Principal Place of Business:

692 W. 29TH ST. # 9
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

692 W. 29TH ST. # 9
HIALEAH, FL 33012

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DEL NODAL, YENNI
6950 W. 2ND WAY
HIALEAH, FL 33014 US

Name and Address of New Registered Agent:

DEL NODAL, YENNI
20012 NW 62 CT
MIAMI, FL 33015 US

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: YENNI Y. DEL NODAL

11/13/2007

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: PSTD () Delete
Name: DEL NODAL, YENNI
Address: 6950 W. 2ND WAY
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DEL NODAL, YENNI
Address: 20012 NW. 62 CT.
City-St-Zip: MIAMI, FL 33015

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: YENNI Y.DEL NODAL

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11/13/2007

Electronic Signature of Signing Officer or Director

Date