2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104595

Entity Name: SUNMULTISERVICES CORP

FILED Jan 04, 2007 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
5775 NW 109 AVENUE, # 14 DORAL, FL 33178 US			5775 NW 109 AVENUE #14	
DORAL, F	L 33176 US	#14 DORAL, FL 33178	US	
Current N	lailing Address:	New Mailing Addres	New Mailing Address:	
5775 NW 109 AVENUE, # 14 DORAL, FL 33178 US		5775 NW 109 AVENU # 14 DORAL, FL 33178		
FEI Number	: FEI Number Applied For () FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		nt: Name and Address o	Name and Address of New Registered Agent:	
SANCHEZ 5775 NW DORAL, F	109 AVENUE, # 14			
	e named entity submits this statement for e of Florida.	the purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registere	d Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribution()			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P,D () Delete SANCHEZ, JORGE 5775 NW 109 AVENUE, #14 DORAL, FL 33178 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP,D () Delete ESCOBAR, MARTHA 5775 NW 109 AVENUE, #14 DORAL, FL 33178 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SE,D () Delete SANCHEZ, RODRIGO 5775 NW 109 AVENUE, #14 DORAL, FL 33178 US	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JORGE SANCHEZ P,D 01/04/2007