## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000018554

Entity Name: SUNRISE NEWHOMES INC.

**FILED** Feb 18, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

728 WINDROSE DR 4786 WEST IRLO BRONSON MEM HWY ORLANDO, FL 32824 US

KISSIMMEE, FL 34746

**Current Mailing Address: New Mailing Address:** 

728 WINDROSE DR 11310 S. ORANGE BLOSSOM TR

ORLANDO, FL 32824 US PMB 360

ORLANDO, FL 32837

FEI Number: 20-8419145 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROOPNARINE, RAVI SEECHARAN, BHARDWAAJ 728 WINDROSE DR 4786 W. IRLO BRONSON MEM HWY

ORLANDO, FL 32824 KISSIMMEE, FL 34746 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: RAVI ROOPNARINE 02/18/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete SEECHARAN, BHARDWAAJ Name: 728 WINDROSE DR Address: City-St-Zip: ORLANDO, FL 32824 US

( ) Delete Title: РО ROOPNARINE, RAUI Name:

378 NE 30 AVE Address: HOMESTEAD, FL 33033 City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition SEECHARAN, BHARDWAAJ Name: Address: 6125 METRO WEST BLVD UNIT107

City-St-Zip: ORLANDO, FL 32835 US

Title: (X) Change ( ) Addition

ROOPNARINE, RAVI Name:

Address: 4786 W. IRLO BRONSON MEM HWY

KISSIMMEE, FL 34746 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.

P O SIGNATURE: RAVI ROOPNARINE 02/18/2008