

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000024872

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Entity Name:** SUNSET INSURANCE CORP.

**Current Principal Place of Business:**

8219 SO. DIXIE HWY  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

8219 SO. DIXIE HWY  
MIAMI, FL 33143

**New Mailing Address:**

**FEI Number:** 26-4476680

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRUZ, FRANK  
19531 NW 77 CT  
MIAMI, FL 33015 US

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

FREIRE, HAYDEE  
8711 SW 97TH AVE  
235  
MIAMI, FL 33173 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: HAYDEE FREIRE

04/02/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FREIRE, HAYDEE  
Address: 8711 SW 97TH AVE # 235  
City-St-Zip: MIAMI, FL 33173

Title: MGR  
Name: GARCIA, PLACIDO  
Address: 727 N. SHORE DR  
City-St-Zip: MIAMI BEACH, FL 33141

I hereby 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 all other like empowered.

SIGNATURE: HAYDEE FREIRE

PD

04/02/2012

Electronic Signature of Signing Officer or Director

Date