

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000079433

**FILED**  
**Nov 09, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA SUNSHINE HOUSE INSPECTIONS CORP.

**Current Principal Place of Business:**

1001 N. FEDERAL HWY., UNIT 7  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

1001 N. FEDERAL HWY., UNIT 7  
LAKE WORTH, FL 33460

**New Mailing Address:**

**FEI Number:** 27-1017460

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAR, DANIELA B  
3273 LAKE WORTH RD.  
PALM SPRINGS, FL 33461 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: WERKMAN, GERDA C  
Address: 1001 N. FEDERAL HWY., UNIT 7  
City-St-Zip: LAKE WORTH, FL 33460

Title: PD  
Name: ACOSTA, REINALDO  
Address: 1001 N. FEDERAL HWY., UNIT 7  
City-St-Zip: LAKE WORTH, FL 33460

Title: VP  
Name: CULPEPPER, CHARLES E JR.  
Address: 1001 N. FEDERAL HWY., UNIT 7  
City-St-Zip: LAKE WORTH, FL 33460

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: REINALDO ACOSTA

PD

11/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date