2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2011
Secretary of State

DOCUMENT# P10000070786

Entity Name: SUNRISE POOLS OF PALM BEACH, INC

Current Principal Place of Business:

504 SW 147TH AVENUE
PEMBROKE PINES, FL 33027 US

New Principal Place of Business:

504 SW 147TH AVE
PEMBROKE PINES, FL 33027 US

Current Mailing Address:

504 SW 147TH AVENUE
PEMBROKE PINES, FL 33027 US

New Mailing Address:

FEI Number: 27-3438922 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PERELLI, CESAR
504 SW 147TH AVENUE
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

BASTIDAS, SIMON
504 SW 147TH AVENUE
PEMBROKE PINES, FL 33027 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: SIMON BASTIDAS 04/19/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: BASTIDAS, SIMON
Address: 504 SW 147TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: VP
Name: PERELLI, CESAR
Address: 504 SW 147TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: SD
Name: MORENO, ANDREINA
Address: FARMACIA LA TRINIDAD CENTRO CA
City-St-Zip: BARINAS ESTADO BARINAS, BA 5201 VE

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: SIMON BASTIDAS P 04/19/2011
Electronic Signature of Signing Officer or Director Date