

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000079603

FILED
Apr 27, 2012
Secretary of State

Entity Name: SUNSHINE MEDICAL HEALTH SERVICES INC

Current Principal Place of Business:

4471 NW 36 STREET
SUITE 204
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

Current Mailing Address:

4471 NW 36 STREET
SUITE 204
MIAMI SPRINGS, FL 33166

New Mailing Address:

FEI Number: 45-3195379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PINO, OSVALDO
4471 NW 36 STREET
SUITE 204
MIAMI SPRINGS, FL 33166 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: P
Name: PINO, OSVALDO
Address: 4471 NW 36 STREET #204
City-St-Zip: MIAMI SPRINGS, FL 33166

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: OSVALDO PINO

P

04/27/2012

Electronic Signature of Signing Officer or Director

Date