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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

FILED Apr 29 1997 8:00am Secretary of State

DOCUMENT # P38897 1. Corporation Name SUNSHINE MATERIALS INC. Principal Place of Business P.O. BOX 1659 INVERNESS FL 32651 Mailing Address P.O. BOX 1659 INVERNESS FL 32651 INVERNESS FL 32451-1659												
							-	3. Date Incorporated or Qualifie 05/20/1992		Date of La 5/01/199		ort
2. Principal F		_	28.	Mailing Address		··_		4. FEI Number			Applie	od For
	Box 165	39	26					59-3106907				pplicable
Suite, Apt	#, etc		27	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Addi Regul	
City & Sta	ite			City & State				6. Election Campaign Financing	n		00 Ma	
3 Inver	ness !	Fkrida	28			7771111		Trust Fund Contribution			ed to F	
Zp 34451	-1659 -1659	Country 25 United State	8 29	Zip	Countr 30	у		This corporation has liability Florida Statutes	Yes	□ No	ers. 19	9.032,
	~	and Address of Cur	rent Regist	ered Agent	81	Name	1	Name and Address of New	Registere	d Agent		
	WNES, NIC	HOLAS J JLF-TO-LAKE HIGH\	WAV		<u> </u>	<u> </u>		······································		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	ERNESS FI		'''A'		82	Street A	Address	(P.O. Box Number is Not Accept	ptable)			
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	t to the provisi registered ag am familiar w	sions of Sections 607.0 gent, or both, in the Sta ith, and accept the ob	0502 and 60 ale of Florid digations of	07.1508, Florida Stat la. Such change wa Section 607.0505, l	utes, the above s authorized be Florida Statute	ve-named or the corp is.	corpora coration's	tion submits this statement for the board of directors. I hereby ac	he purpose ccept the a	of changir opointmen	ng its re t as reg	egistered iistered
SIGNATURE 12. TITLE NAME	PD BOURDE	de ponted name of organization OFFICERS A	ager Land title AND DIREC	l'applicable. (N	OTE Registered Ag 13. 1.1 TITLE 1.2 NAME	ent signature i	D/P Nicho	nen reinstating) ADDITIONS/CHANGES TO OI	DATE		TORS I	
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4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation orthological effect as if made under oath; that appears in Block 12 or Block 13 if changed. John and that my name appears in Block 12 or Block 13 if changed. John and that my name appears in Block 12 or Block 13 if changed.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97

(353) 136-1011

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