

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 12, 2006
Secretary of State**

DOCUMENT# P93000037725

Entity Name: SUNRISE ENTERPRISES, INC. OF PALM BEACH COUNTY

Current Principal Place of Business:

3307 NORTHLAKE BLVD.
SUITE 101
PALM BEACH GARDENS, FL 33403 US

New Principal Place of Business:

Current Mailing Address:

3939 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404 US

New Mailing Address:

FEI Number: 65-0419186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRASWELL, PAMELA
3939 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404 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 () Delete
Name: BRASWELL, PAMELA
Address: 3939 NORTH OCEAN DRIVE
City-St-Zip: SINGER ISLAND, FL 33404 US

Title: S () Delete
Name: BRASWELL, PAMELA
Address: 3939 NORTH OCEAN DRIVE
City-St-Zip: SINGER ISLAND, FL 33404 US

Title: T () Delete
Name: BRASWELL, PAMELA
Address: 3939 NORTH OCEAN DRIVE
City-St-Zip: SINGER ISLAND, FL 33404 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: STRICKLAND, E T
Address: 3939 NORTH OCEAN DRIVE
City-St-Zip: SINGER ISLAND, FL 33404 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAMELA BRASWELL

P

04/12/2006

Electronic Signature of Signing Officer or Director

Date