2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # P93000052325 1. Entity Name SUN MARKETING GROUP, INC.

Principal Place of Business

1124 SOUTH WICKHAM ROAD W MELBOURNE, FL 32904 US



May 03, 2006 08:00 AM Secretary of State

Mailing Address

1124 SOUTH WICKHAM ROAD

W MELBOURNE, FL 32904



FILED

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 59–3191868 Not Applied be Not Applied be

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

ANDERSON, J. PATRICK 930 S. HARBOR CITY BLVD. SUITE 505 MELBOURNE, FL 32901

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No Chg-P

04272006

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE.	Signalure, lypedier printed name of registe ad agent and life is	fappicable (NCTE Registered	Agent signature	required when renalating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		,	
TITLE NAME STREET ADDRESS CITY-ST ZIP	D BOHNE, JOHN P 131 LANSING ISLAND DR INDIAN HARBOUR BEACH, FL 32937	;			
TITLE NAME STREET ADDRESS CITY: ST ZIP	D MILLETT, RAYMOND J JR 2435 DEERCREEK LOB LOLLY LANE DEERFIELD BEACH, FL 33442				000000561265 05/19/06-80007-017 150.00
TITLE NAME STREET ADDRESS CITY ST ZIP	D FOOR, ANDREW R 2239 PINNACLE CIRCLE NORTH PALM HARBOR, FL 34684			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY+ST+ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST ZIP					
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with his tiling does not qualify for the exemptions contained 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 signature shall have the same legal effect as it made under oath, that I am an officer or director of the corporation or the receiver. I trusts even contained to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment such as a contained with an effect of the corporation of the receiver.

SIGNATURE

CITY - ST - ZIP

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

321-723-0501