


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-27-2008 90023 023 ***150.00

DOCUMENT # P94000084636			
1. Entity Name SUNSHINE ENTERPRISES, INC.			
Principal Place of Business D/B/A THE GRATEFULL THREAD 12729 NW 18TH MANOR CORAL SPRINGS FL 33071 US		Mailing Address D/B/A THE GRATEFULL THREAD 12729 NW 18TH MANOR CORAL SPRINGS FL 33071 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 10158 NW 47th ST	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State SUNRISE, FL.	
Zip	Country	Zip	Country
33351		BROWARD	
6. Name and Address of Current Registered Agent KRELLIN, KENNETH PRES. 12729 NW 18TH MANOR CORAL SPRINGS FL 33071		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rechartering)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State.		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KRELLIN, KENNETH PRES 12729 NW 18TH MANOR CORAL SPRINGS FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. KENNETH KRELLIN 10158 NW 47 th ST SUNRISE FLORIDA 33351 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT KRELLIN, CAROL SECT. 12729 NW 18TH MANOR CORAL SPRINGS FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT. CAROL KRELLIN 10158 NW 47 th ST. SUNRISE, FL. 33351 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/08
Date

957
574-8383
Daytime Phone #