

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000022263

FILED
Jan 24, 2004
Secretary of State

Entity Name: SUN RAYS SPORTSWEAR, INC.

Current Principal Place of Business:

1014 U.S. HIGHWAY 19
HOLIDAY, FL 34691

New Principal Place of Business:

1014 U.S. HIGHWAY 19
SUITE 114
HOLIDAY, FL 34691

Current Mailing Address:

1014 U.S. HIGHWAY 19
HOLIDAY, FL 34691

New Mailing Address:

1014 U.S. HIGHWAY 19
SUITE 114
HOLIDAY, FL 34691

FEI Number: 59-3302647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREOPOULOS, EFFI
1014 U.S. HIGHWAY 19
HOLIDAY, FL 34691

Name and Address of New Registered Agent:

ANDREOPOULOS, EFFIE
1014 U.S. HIGHWAY 19
SUITE 114
HOLIDAY, FL 34691

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: EFFIE ANDREOPOULOS

01/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDREOPOULOS, EFFI
Address: 410 PALMDALE DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: VP () Delete
Name: ANDREOPOULOS, DIMITRIOS
Address: 3001 VALENCIA LN E
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANDREOPOULOS, EFFIE
Address: 3001 VALENCIA LN E
City-St-Zip: PALM HARBOR, FL 34684

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EFFIE ANDREOPOULOS

PD

01/24/2004

Electronic Signature of Signing Officer or Director

Date