

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000086746

Entity Name: SUNSHINE SPICE, CORP.

FILED
Jun 29, 2009
Secretary of State**Current Principal Place of Business:**8180NW 36TH. AVE.
MIAMI, FL 33147 US**New Principal Place of Business:****Current Mailing Address:**8180NW 36TH. AVE.
MIAMI, FL 33147 US**New Mailing Address:**

FEI Number: 65-0648655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MEJIA, PABLO A P
8180NW 36TH AVE.
MIAMI, FL 33147 US**Name and Address of New Registered Agent:**ALVISO, MARIA A P
8180NW 36TH AVE.
MIAMI, FL 33147 US

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: MARIA ALVISO

06/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: MEJIA, PABLO A P
Address: 8180 NW 36TH.AVE.
City-St-Zip: MIAMI, FL 33147Title: VP () Delete
Name: ALVISO, MARIA M
Address: 8180 NW 36 AVE.
City-St-Zip: MIAMI, FL 33147Title: S () Delete
Name: RIVERA, CARLOS E
Address: 8180 N.W. 36 AVE.
City-St-Zip: MIAMI, FL 33147Title: T () Delete
Name: DAMAS, YVELINO
Address: 8180 NW 36 AVE.
City-St-Zip: MIAMI, FL 33147**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: ALVISO, MARIA M P
Address: 8180 NW 36TH.AVE.
City-St-Zip: MIAMI, FL 33147Title: VP (X) Change () Addition
Name: MEJIA, PABLO A
Address: 8180 NW 36 AVE.
City-St-Zip: MIAMI, FL 33147Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARIA ALVISO

P

06/29/2009

Electronic Signature of Signing Officer or Director

Date