

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000000565

FILED
Apr 12, 2006
Secretary of State

Entity Name: E & S SUNRISE PROPERTY, INC.

Current Principal Place of Business:

C/O ALL QUALITY PROPERTY
3328 NE 11TH AVE
FORT LAUDERDALE, FL 333342712

New Principal Place of Business:

C/O THE REAL ESTATE LINK CORP.
950 S PINE ISLAND RD STE 1034
PLANTATION, FL 33324

Current Mailing Address:

C/O ALL QUALITY PROPERTY
3328 NE 11TH AVE
FORT LAUDERDALE, FL 333342712

New Mailing Address:

C/O THE REAL ESTATE LINK CORP.
950 S PINE ISLAND RD STE 1034
PLANTATION, FL 33324

FEI Number: 65-0648989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATES, MICHAEL L
2435 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KUNZ, EDWIN
Address: 3328 NE 11TH AVE
City-St-Zip: FORT LAUDERDALE, FL 333342712

Title: ST () Delete
Name: KUNZ, SIEGLINDE
Address: 3328 NE 11TH AVE
City-St-Zip: FORT LAUDERDALE, FL 333342712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KUNZ, EDWIN
Address: 950 S PINE ISLAND RD STE 1034
City-St-Zip: PLANTATION, FL 33324

Title: ST (X) Change () Addition
Name: KUNZ, SIEGLINDE
Address: 950 S PINE ISLAND RD. STE 1034
City-St-Zip: PLANTATION, FL 33324

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: RAUL SHARPE

MGR

04/12/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date