

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000035593

Entity Name: SUNNY TITLE SERVICES, INC.

FILED
May 28, 2008
Secretary of State

Current Principal Place of Business:

1426 MERCADO AVENUE
CORAL GABLES, FL 33146 US

New Principal Place of Business:

Current Mailing Address:

1426 MERCADO AVENUE
CORAL GABLES, FL 33146 US

New Mailing Address:

FEI Number: 65-0729637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, BEATRIZ
1426 MERCADO AVENUE
CORAL GABLES, FL 33146 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

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: JIMENEZ, BEATRIZ
Address: 1426 MERCADO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: PS () Delete
Name: JIMENEZ, BEATRIZ
Address: 1426 MERCADO AVEUE
City-St-Zip: CORAL GABLES, FL 33146

Title: VPT () Delete
Name: DE YURRE, ADRIAN
Address: 1426 MERCADO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: VP () Delete
Name: JIMENEZ, AUDRIA E
Address: 1426 MERCADO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP (X) Change () Addition
Name: JIMENEZ, AURIA S
Address: 1426 MERCADO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

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: BEATRIZ JIMENEZ

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05/28/2008

Electronic Signature of Signing Officer or Director

Date