

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000068710

FILED  
Apr 29, 2003  
Secretary of State

Entity Name: SUNNY GIFTS, INC.

## Current Principal Place of Business:

6500 TANGLEWOOD BAY DRIVE  
2008  
ORLANDO, FL 32821 US

## New Principal Place of Business:

529 S. MACDILL AVE  
TAMPA, FL 33609 US

## Current Mailing Address:

6500 TANGLEWOOD BAY DRIVE  
2008  
ORLANDO, FL 32821 US

## New Mailing Address:

529 S. MACDILL AVE  
TAMPA, FL 33609 US

FEI Number: 59-3399787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL DIMPLE  
6500 TANGLEWOOD BAY DRIVE  
# 2008  
ORLANDO, FL 32821

## Name and Address of New Registered Agent:

PATEL DIMPLE  
529 S. MACDILL AVE  
TAMPA, FL 33609

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: DIMPLE PATEL

04/29/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PATEL, MANUBHAI  
Address: 6500 TANGLEWOOD BAY DR # 2008  
City-St-Zip: ORLANDO, FL 32821

Title: P ( ) Delete  
Name: PATEL, DIMPLE  
Address: 6500 TANGLEWOOD BAY DR # 2008  
City-St-Zip: ORLANDO, FL 32821

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: PATEL, MANUBHAI  
Address: 529 S. MACDILL AVE  
City-St-Zip: TAMPA, FL 33609

Title: P (X) Change ( ) Addition  
Name: PATEL, DIMPLE  
Address: 529 S. MACDILL AVE  
City-St-Zip: TAMPA, FL 33609

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: DIMPLE PATEL

P

04/29/2003

Electronic Signature of Signing Officer or Director

Date