


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000070323 (6) 1. Corporation Name SUNSHINE CAPITAL, INC.			
Principal Place of Business 3850 N.E. 23RD AVE. LIGHTHOUSE POINT FL 33064		Mailing Address 3850 N.E. 23RD AVE. LIGHTHOUSE POINT FL 33064	
2. Principal Place of Business 21 FL Suite, Apt. #, etc.		2a. Mailing Address 26 3850 NE. 23RD AVE Suite, Apt. #, etc.	
23 Lighthouse Point FL City & State 24 33064 Zip 25 USA Country		28 Lighthouse Point, FL City & State 29 33064 Zip 30 USA Country	
9. Name and Address of Current Registered Agent LEUSCHNER, HERBERT 3850 N.E. 23RD AVE. LIGHTHOUSE POINT FL 33064			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <i>Herbert Leuschner</i> DATE			
12. OFFICERS AND DIRECTORS 1.1 TITLE D <input type="checkbox"/> DELETE 1.2 NAME LEUSCHNER, HERBERT 1.3 STREET ADDRESS 3850 N.E. 23RD AVE. 1.4 CITY - ST - ZIP LIGHTHOUSE POINT FL 33064			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP			
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: <i>Herbert Leuschner</i> HERBERT LEUSCHNER 3/31/98 954-941-1293			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/22/1996	
4. FEI Number 65-0705675	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

CR2E034 (10/97)