

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 29 1998 8:00am
Secretary of State

DOCUMENT # P97000008299
1. Corporation Name
Sunshine Exchange, Inc.

Principal Place of Business Mailing Address
508 N.E. 190th Street Brian S. Campbell, Pres.
Miami, FL 33179 508 N.E. 190th Street
Miami, FL 33179

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
1/28/97

4. FEI Number 65-0739972
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

EMO Corporate Services, Inc.
English, McCaughan & O'Bryan, P.A.
100 N.E. Third Ave., Suite 1100
Ft. Lauderdale, FL 33301

10. Name and Address of New Registered Agent

81 Name Jonathan J. Lichtman, P.A.
82 Street Address (P.O. Box Number is Not Acceptable)
The Sanctuary Centre, Suite D-100
83 4800 N. Federal Highway
84 City Boca Raton FL 85 Zip Code 33431

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 Jonathan J. Lichtman, P.A. 7/1/98

Signature of current registered agent and title (if applicable)

Signature of new registered agent and title (if applicable)

12. OFFICERS AND DIRECTORS

11 TITLE P/S/T/D
12 NAME Brian S. Campbell
13 STREET ADDRESS 508 N.E. 190th St.
14 CITY-ST-ZIP Miami, FL 33179

15 TITLE ☐ DELETE
16 NAME
17 STREET ADDRESS
18 CITY-ST-ZIP

19 TITLE ☐ DELETE
20 NAME
21 STREET ADDRESS
22 CITY-ST-ZIP

23 TITLE ☐ DELETE
24 NAME
25 STREET ADDRESS
26 CITY-ST-ZIP

27 TITLE ☐ DELETE
28 NAME
29 STREET ADDRESS
30 CITY-ST-ZIP

31 TITLE ☐ DELETE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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 Brian S. Campbell, President (305) 654-8015 7/30/98

CR2E034 (10/97)