2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 17, 2006 08:00 AM Secretary of State

ANNUAL REPORT					Secretary of State				
DOCUMENT # P97000058792 t. Entity Name ZZZ SUNNY FLORIDA, INC.						Secreta	ary of	State	e
Principal Plac	e of Business	Mailing Address		_	}				-
3355 SE 221		1318 LAFAYETTE ST	. 4						
CAPE CORAL	, FL 33504	CAPE CORAL, FL 3390	· ··		1 297/15 21 114 (1	PIN NYN 88717 88177 WEN	t WEIN ? Trun 1911 II	uiv julib no	(49) 2) (49)
Principal Place of Business 3. Mailing Addr				<u> </u>					
1808 SW 48th Ter		Suite, Apt. #. etc			}				(82) () (22)
					01062006	Chg-P	CR2E034	·	
Cape Coral, FL		City & State			4. FEI Number 65-0786	005			plied For t Applicable
Zip # 33914 Country		Zip Country		ntry	5. Certificate o	f Status Desired		.75 Add	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
HILL, THOMAS W				Name Street Address (P.O. Box Number is Not Acceptable)					
1	AYETTE ST RAL, FL 33904		Street Address			is Not Acceptable	·)		
	•	en up				· · · · · · · · · · · · · · · · · · ·			
				City			FL }	Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE									
Signature, reced or printed name of registance agent and talled any fleable (RIOTE Registered Agent algorature required when reinstalling) DATE									
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campa Trust Fund Cont			.00 May Be led to Fees				
10.	OFFICERS AND		11.		ADDITIONS/C	HANGES TO OFF			
TITLE NAME	D SONDER, KARLHEINZ	☐ Delete	TOTO NAM					Change	☐ Addition
STREET ADDRESS	ADDRESS 1808 SW 48TH TERRACE		STR	CET ADDRESS		00000 01/19/06	0386863 _00015_0	177 TE	50 O
CHY-SI-ZIP	CAPE CORAL, FL 33914		-	(-S)-ZiP		027 237 00		Change	
TITLE NAME	HUTTNER, OLIVER	☐ Delete	JTJT JAM	· {			<u>_</u>	3 change	Addition
STREET ADDRESS	1221 SW 10TH TERRACE			EET ADDRESS					
TITLE	CAPE CORAL, FL 33991	☐ Defete	TITE	f-ST-ZIP				7 Change	Addition
NAME		n politic	MAN				_	7 Original	L Facilies
STREET ADDRESS CHY-SI-BP				EET ADDRESS (1-SI-ZIP					
IME		☐ Delete	TOTAL			· · 	Ε	Change	☐ Addition
NAME			NAN						
SIRCET ADDRESS GILY-SI-ZIP				CET ADDRESS 1-SI-ZIP					
TALE		☐ Delete	TISE	(] Change	Addition
NAME STREET ADDRESS				EET ADORESS					
CITY-ST-ZIP			CITY	f-ST-ZIP					
NAME		☐ Delete	IT/T AAM] Change	Addillan
STREET ANDRESS	** *	· · · · · · · · · · · · · · · · · · ·	. Str	EET AODRESS					
12. Thereby	certify that the information supplied with	this filing does not qualify for	or the ex	Y-SI-ZIP remptions container	d in Chapter 119.	Florida Statutes. I	further certify	that the ii	nfòrmation
indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered									
SIGNAT	TURE: Clave	duttue		. Sec	<u>. </u>	-12-06			
}	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER	OR DIREC	TOR		Oale	Day'i	me Phone #	