

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000095654

FILED
Mar 26, 2008
Secretary of State

Entity Name: SUNSHINE REEF INC.

Current Principal Place of Business:

CALVO, LIZABETH F PA
328 CRANDON BLVD STE 226
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

LOEB, BLOCK & PARTNERS LLP
505 PARK AVE 9TH FL
NEW YORK, NY 10022 US

New Mailing Address:

CALVO, LIZABETH F PA
328 CRANDON BLVD STE 226
KEY BISCAYNE, FL 33149 US

FEI Number: 59-3476592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALVO, LIZABETH F PA
328 CRANDON BLVD., SUITE 226
KEY BISCAYNE, FL 33149 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: NOTTEBOHM, JOHANN D.
Address: 505 PARK AVE 9TH FL
City-St-Zip: NEW YORK, NY 10022

Title: DVP () Delete
Name: GOETZ, THOMAS RAINER
Address: 505 PARK AVE 9TH FL
City-St-Zip: NEW YORK, NY 10022

Title: AS () Delete
Name: BEKELE, DANIEL
Address: 505 PARK AVENUE, 9TH FLOOR
City-St-Zip: NEW YORK, NY 10022

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:

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: DANIEL BEKELE

AS

03/26/2008

Electronic Signature of Signing Officer or Director

_____ Date