

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075676

Entity Name: SUNSET HORIZON, INC.

FILED
Apr 25, 2009
Secretary of State

Current Principal Place of Business:

1706 N.W. 15TH AVENUE
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1706 N.W. 15TH AVENUE
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0865311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNEED, MICHAEL
3150 HOUSTON STREET
FT LAUDERDALE, FL 33312 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: PD () Delete
Name: SNEED, JOSEPH
Address: 1706 N.W. 15TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: VD () Delete
Name: SNEED, MICHAEL
Address: 3150 HOUSTON STREET
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD () Delete
Name: SNEED, SANDRA
Address: 3150 HOUSTON STREET
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: TD () Delete
Name: SNEED, FAITHER
Address: 1706 N.W. 15TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

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:

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: JOSEPH SNEED

PD

04/25/2009

Electronic Signature of Signing Officer or Director

Date