


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2008 8:00 am
Secretary of State

02-12-2008 90019 038 ***150.00

| | |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # P99000078083 1. Entity Name SUNSHINE OIL & GAS PRODUCTS, INC. |  |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

| | |
|-------------------------------------------------------------------------|-------------------------------------------------------------|
| Principal Place of Business 1106 N.W. 129TH PLACE MIAMI, FL 33182 | Mailing Address 1106 N.W. 129TH PLACE MIAMI, FL 33182 |
|-------------------------------------------------------------------------|-------------------------------------------------------------|

66003046



02022008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|-------------------------------------------------------------------------------------------------|-------------------------------|
| 4. FEI Number 65-0946482 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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|-------------------------------------------------------------------------------------------------------------------|
| 6. Name and Address of Current Registered Agent ALVEAR, RAFAEL 1106 N.W. 129TH PLACE MIAMI, FL 33182 |
|-------------------------------------------------------------------------------------------------------------------|

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when re-registering)

DATE

02-04-08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

| | |
|----------------------------------------------------|------------------------------------------------------------------|
| 10. OFFICERS AND DIRECTORS | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD ALVEAR, ASTRID 8521 S.W. 88TH COURT MIAMI, FL 33143 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD ALVEAR, RAFAEL 1106 N.W. 129TH PLACE MIAMI, FL 33182 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02-04-08

RAFAEL ALVEAR

305-554-6045