## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000096299**

1. Entity Name

BABY SUNSHINE, INC.



FILED Apr 23, 2007 .08:00 Al Secretary of State

Principal Place of Business

4901 NORTH 36TH ST. HOLLYWOOD, FL 33021 Mailing Address

4901 NORTH 36TH ST. HOLLYWOOD, FL 33021



DO NOT WOITE IN THIS COACE	04182007 No Chg-P	J3 <del>4</del> (11/05)	
DO NOT WRITE IN THIS SPACE	4. FEI Number 65-0975955	Applied For Not Applicable	
	5. Certificate of Status Desired	167	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRANKEL, LAURIE A 4901 NORTH 36TH ST. HOLLYWOOD, FL 33021

## 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 signature	required when reinstating)	DATE	
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE	Р				•	
NAME	FRANKEL, LAURIE A				·	
STREET ADDRESS	4901 N 36 STREET					
CITY-ST-ZIP	HOLLYWOOD, FL 33021				U00000725282	
TEFLE NAME STREET ADDRESS CITY-ST-ZIP					05/03/07-80018-003 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE						
NAME						
STREET ADDRESS	<u></u>					
CITY-ST-ZIP	· ,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 ag address, with all other like empowered.						