

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 22, 2005 8:00 am
Secretary of State

06-22-2005 90078 028 ***150.00

DOCUMENT # P99000098169					
1. Entity Name SUNSHINE SERVICE STATION, INC					
Principal Place of Business 1120 NE 48 ST POMPANO BEACH, FL 33064 US			Mailing Address 1120 NE 48 ST POMPANO BEACH, FL 33064 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04142005 Chg-P CR2E034 (10/03)	
4. FEI Number 65-0962199				Applied For ☐ Not Applicable	
5. Certificate of Status Desired				☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KARANTZOGIANNIS, FARANTOS 3675 NW 35TH ST COCONUT CREEK, FL 33068			Name Street Address (P.O. Box Number is Not Acceptable) 3826 Pebblebrook CT City Coconut Creek FL Zip Code 33073		
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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KARANTZOGIANNIS, FARANTOS 3675 N.W. 35TH ST. COCONUT CREEK, FL 33068 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 3826 Pebblebrook CT. Coconut Creek FL 33073	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 will fall either be empowered.					
SIGNATURE _____			4/18/05 954943-6694		
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Farantos Karantzogiannis					