2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCÚMENT # S17719 SUNSHINE T & C CO. LTD. INC.

FILED Apr 25, 2007 08:00 AM Secretary of State

Principal Place of Business

300 ADAIR AVENUE LONGWOOD, FL 32750 US Mailing Address

300 ADAIR AVE Longwood, FL 32750 US



DO NOT WRITE IN THIS SPACE

04022007 No Gig-P	CR2E034 (11/05)		
4. FEI Number		Applied For	
59-3068756		Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional	

6. Name and Address of Current Registered Agent

SIGNATURE: HELEN TONG-SHEH YU TSA

TSAI, HUI-MIN 300 ADAIR AVE LONGWOOD, FL 32750

DO NOT WRITE IN THIS SPACE

 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. 							
the obligat	លោន ហ មេជ្ជាន់មេមប ឧប្តមារេ.	1/	~ . *		11/2 /23		
SIGNATURE.		Dung	mi	سيطي	412101		
Signeture, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aigneture required when remainting) DATE							
FILE NOW!!! FEE IS \$150.00 - Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees	U00000731270			
10.	OFFICERS AND DIREC	CTORS			l 95/98/97 00116 883 150.88		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TSAI, HUI-PANG 184 MIN SHENG ROAD CHI-CHI NANTOU, ROC,						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CHIEN, REYMOND RUEY-MING 2F NO. 23 LANE 228 SEC 3 HO PING TAIPEI TAIWAN, RO	E ROAD					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT TSAI, HUI-MIN 300 ADAIR AVE LONGWOOD, FL		DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS TSAI, HELEN TONG-SHEH YU 300 ADAIR AVE LONGWOOD, FL			IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST TSAI, HELEN TONG-SHEH YU 300 ADAIR AVE LONGWOOD, FL 32750						
TITLE NAME STREET ADORESS CITY-ST-ZIP	4						
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.							