FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

FILED
Jun 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S49876

1. Corporation Name

SUNSHINE SWEETS, INC.

Principal Place of Business	Mailing Address
200 S. Biscayne Blvd. #4874 Miami, FL 33131	200 S. Biscayne Blvd. #4874 Miami, FL 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Sunshine Sweets	2a. Mailing Address
21 8520 N.W 56 St	26 Same.
Suite, Apt #, etc 22 Miami Fl 33166	Suite, Apt. #, etc. 27
City & State 23 Miami Florida	City & State 28
Zip 24 33166 / Country 25 USA.	Zip 29 / Country 30

3. Date Incorporated or Qualified 5/1/91

4. FEI Number 59-3067955 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

Peninsula Registered Agents, Inc
200 S. Biscayne Blvd.
#4874
Miami, FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ (NOTE: Registered Agent signature required when reinstating) DATE

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	President	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Tovar, Jacobo		1.2 NAME	
STREET ADDRESS	8520 NW 56th St		1.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL		1.4 CITY-ST-ZIP	
TITLE	Secretary/Treasurer	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Guerrero, Pedro		2.2 NAME	
STREET ADDRESS	8520 NW 56th Street		2.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	300002574423
STREET ADDRESS			6.3 STREET ADDRESS	-06/23/98--01027--048
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***550.00

6-26

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jacobo Tovar June 11th 1998
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/97)