

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V71301

Entity Name: SUNAR HOLDING, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

132 ISLE OF VENICE
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

132 ISLE OF VENICE
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 65-0354842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAUN, SABINE
132 ISLE OF VENICE
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARNOLD, JOHANN
Address: 132 ISLE OF VENICE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP () Delete
Name: SABINE, BRAUN
Address: 132 ISLE OF VENICE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TS () Delete
Name: ROLF, BRAUN
Address: 132 ISLE OF VENICE
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SABINE BRAUN
Address: 132 ISLE OF VENICE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VPD (X) Change () Addition
Name: JOHANN ARNOLD
Address: 132 ISLE OF VENICE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TSD (X) Change () Addition
Name: ROLF BRAUN
Address: 132 ISLE OF VENICE
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SABINE BRAUN

PD

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date