

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **838040** (4)
1. Corporation Name
SANDY & BABCOCK INC



Principal Place of Business 1349 LARKIN ST. SAN FRANCISCO CA 94109 US	Mailing Address 1349 LARKIN ST. SAN FRANCISCO CA 94109 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/16/1977	
4. FEI Number 94-1723964	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	

2. Principal Place of Business		2a. Mailing Address	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	27. City & State	28. City & State
23. Zip	25. Country	29. Zip	30. Country

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81. Name		85. Zip Code	
82. Street Address (P.O. Box Number is Not Acceptable)			
83. City			

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVT	1.1 TITLE	OG
NAME	SANDY, DONALD, JR	1.2 NAME	
STREET ADDRESS	16 DAVID COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN RAFAEL CA	1.4 CITY-ST-ZIP	
TITLE	DPS	2.1 TITLE	
NAME	BABCOCK, JAMES A	2.2 NAME	
STREET ADDRESS	2760 GREEN ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	DP
NAME		3.2 NAME	Eller, John F.
STREET ADDRESS		3.3 STREET ADDRESS	317 KNIGHT DRIVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	SAN RAFAEL, CA
TITLE		4.1 TITLE	DS
NAME		4.2 NAME	RICHARD GRAHAM
STREET ADDRESS		4.3 STREET ADDRESS	2727 South West 26th Avenue
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Miami, FL
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

John F. Eller

4/28/98 415-673-899A

CR2E034 (10/97)