

5-15-98 B 7415 C
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FILED
May 15 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 # P94000070201 (6)
 1. Corporation Name
SANDERS GROUP, INC.



Principal Place of Business: 2338 IMMOKALEE RD SUITE 225 NAPLES FL 33942
 Mailing Address: 2338 IMMOKALEE RD SUITE 225 NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24)
 2a. Mailing Address (25-28)

3. Date Incorporated or Qualified: 09/23/1994
 4. FEI Number: 65-0292032
 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
KANTOR, WARREN
 2338 IMMOKALEE RD
 SUITE 225
 NAPLES FL 33942

10. Name and Address of New Registered Agent
 81 Name: Aster Group Corp.
 82 Street Address (P.O. Box Number is Not Acceptable): 2338 Immokalee Rd
 83 Suite 225
 84 City: Naples FL 85 Zip Code: 33942

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: *Paul Kirk* Paul Kirk, Treasurer 4-23-98
Signature of registered agent and, if applicable, Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		DELETED
TITLE	D	<input type="checkbox"/>
NAME	KANTOR, WARREN	
STREET ADDRESS	2338 IMMOKALEE RD, #225	
CITY-ST-ZIP	NAPLES FL 33942	
TITLE	P	<input type="checkbox"/>
NAME	CLOUSER, KATRINA	
STREET ADDRESS	2338 IMMOKALEE RD STE 225	
CITY-ST-ZIP	NAPLES FL 33942	
TITLE	T	<input type="checkbox"/>
NAME	KIKK, PAUL	
STREET ADDRESS	2338 IMMOKALEE RD STE 225	
CITY-ST-ZIP	NAPLES FL 33942	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2 NAME	Linda Watson		
2.3 STREET ADDRESS	2338 Immokalee Rd Ste 225		
2.4 CITY-ST-ZIP	Naples, FL 33942		
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
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: *Paul Kirk* 4-22-98

CFR2E034 (10/97)