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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 693698

131

FILED Feb 10 1998 8:00am Secretary of State

Principal Place	AS K. SANDS, P.A.	Mailing Address S DOUGLAS K SANDS						
300 COLORADO AVENUE		300 COLORADO AVENUE						
STUART FL 3	4994	STUART FL 34994			DO NOT WRIT	E IN THIS	SPACE	
					3. Date Incorporated or Qualified 07/01/1981			
2. Principal Pi 21	cipal Place of Business 2a. Marling Add 26		dress		4. FEI Number 59-2101962			oplied For ot Applicable
Suite, Apt. #, etc		Suite: Apt. #, etc.		5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
23		28	·		Trust Fund Contribution		Added t	o Fees
Ζιρ	Country	Z(p)	Countr	У	8. This corporation owes or has p			
24	25 25 Name and Address of Currer	29 Agent	[30]		Personal Property Tax due Jun 10. Name and Address of New R			J No
SANDS, DOUGLAS K				Name	10. Hallo allo Assatado Ol Hoste II	08.010.00	- Gold	
	COLORADO AVENUE		82	Street Add	ress (P.O. Box Number is Not Accepte	ible)		
Sit	JART FL 34994		63	 				
			84	City		FL	85 Zip (Code
11. Pursuant to office or reagent I as SIGNATURE	to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the oblig	12 and 607, 1508, Florida Statu of Florida, Such change was ations of, Section 607, 0505, F	ites, the above authorized be lorida Statute	ve-named corp by the corporal as.	poration submits this statement for the tion's board of directors. I hereby acce	purpose o	f changing its pointment as	s registered registered
	Signature, typeofor printed name of regularised age			ent signature requi	red when reinstating)	DATE		
12.	OLLICERS AN	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF	CERS ANI	D DIRECTOR Change	S IN 12
TITLE NAME	SANDS, DOUGLAS K		1.1 TIFLE 1.2 NAME		•		C CHAING	
STREET ADDRESS	300 COLORADO AVENUE			T ADDRESS				'
CITY-ST-ZIP	STUART FL		1.4 CiTY-					
TITLE		DELETE	2 1 TITLE				Change	Addition
NAME			2 2 NAME	Ì				
STREET ADDRESS			2 3 STREE	T ADDRESS				
CITY-ST-ZIP			2. 4 CITY	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME			3 2 NAME	!				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-	- S1 - ZIP			Change	Addition
NAME			4.2 NAME	.			CT CHANGE	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			4.4 CITY-	I .				i
TITLE	DELETE		5.1 TITLE				Change	Addition
NAME			5.2 NAME	ì				
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP			5 4 CITY-	ST-ZIP				
TITLE		☐ DELFTE	6.1 TITLE				Change	Addition
NAME			6.2 NAME		·			
STREET ADDRESS			63 STREE	T ADDRESS				
CITY-ST-ZIP			64 CITY-		O. at adoptions Fig. 1. o.	17 -9	106 AL 1 41	
14. I hereby c	erity that the information supplied w	ath this filing does not qualify.	ror the exemi	otion Stated in	Section 119.07(3)(i), Florida Statutes.	I turther co	aruty that the	information i

indicated on this armula report or supplied with misming does not quality for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the informatic indicated on this armula report or supplemental annual report is true and facturate 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.

(51)287-3930