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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9600000276

SANDAL INC. OF DELAWARE

FILED Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90030 045 ***150.00



Principal Plac	ce of Business	Mailing Address				- 1 18811100 1116 10110 01111 80111 00111 00111	BB } B		
8816 SHOAL CREEK LANE BOYNTON BEACH FL 33437 8816 SHOAL CREEK LANE BOYNTON BEACH FL 33437						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	SPACE		
						01/17/1996			
2. Principal f	Place of Business	2a. Mailing Address				4. FEI Number	Applied F	or	
21		26				11-3150293	Not Appl		
Suite, Apt	. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Addition Fee Required		
City & Sta	ite 🗥	City & State				6: Election Campaign Financing	\$5.00 May B	3e	
23		28				Trust Fund Contribution	Added to Fee		
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year in	tangible		
24	25	29	30			Personal Property Tax.	∐Yes □No	·	
• •	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
		of the Section		81 Nan	ne			•	
	RMAN, ALBERT			00 04	_	(D.O. D.), Market 1, Marke	•		
	6 SHOAL CREEK LANE			82 Stre	et Addres	ss (P.O. Box Number is Not Acceptable)			
BO	YNTON BEACH FL 33437			83		2 1 1 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	A 4 TO 183	1111	
						"表现,这类的概念。"\$P\$ (1) (1) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	被 对为。"别"。		
•		•		84 City		Section 1995 FI	85 Zip Code	. , , ,	
44 Pursuant	t to the provisions of Sections 607 0502	and 607 1508. Florida Statute	e the at	vove-nam	ed corpor	ation submits this statement for the purpose of	hohanaina ite regiete	erod	
office or	registered agent, or both, in the State of	f Florida. Such change was au	thorized	by the co	rporation	's board of directors. I hereby accept the appo	intment as registere	ed	
agent. I a	am familiar with, and accept the obligation	ons of, Section 607.0505, Flori	ida Statu	ites.			•		
	Contract to the contract of th								
SIGNATURE		and the Manager Alors	Danista and			DITE:		_ [
	Signature, typed or printed name of registered agent			Agent signatu	re required w	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN	-	
12.	Signature, typed or printed name of registered agent of OFFICERS AND	DIRECTORS	13.	•	re required w	ADDITIONS/CHANGES TO OFFICERS AI			
12.	Signature, typed or printed name of registered agent in OFFICERS AND PDC		13.	LE	re required w			12 Addition	
12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND PDC FURMAN, SANDRA	DIRECTORS	13. 1.1 TIT 1.2 NA	LE ME	-				
12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent of PDC PDC FURMAN, SANDRA 8816 SHOAL CREEK LANE	DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 STI	LE ME REET ADDRE	-				
12. TITLE NAME STREET ADDRESS CITY- ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND PDC FURMAN, SANDRA	DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT	LE ME REET ADDRE Y-ST-ZIP	-		☐ Change ☐ A	Addition	
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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 an attachment with an address, with all other like empowered.

SIGNATURE

561-737-3250