2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003336

City-St-Zip:

Entity Name: SANDCASTLE HOTEL, INC.

FILED Mar 13, 2009 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|---|---|--------------------------------|---------------------|---|-----------------------------|---|--|
| | FRANKLIN DI A, FL 34236 | RIVE US | | | | | |
| Current M | lailing Addres | ss: | Ne | w Mailii | ng Addre | ss: | |
| | FRANKLIN DI A, FL 34236 | RIVE | | | | | |
| FEI Number: | : 65-0842217 | FEI Number Applied For () | FEI Number | Not Appli | icable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | | |
| 1200 SOU | PORATION SY TH PINE ISLA ION, FL 33324 | ND ROAD | | | | | |
| | named entity e of Florida. | submits this statement for | the purpose of ch | anging it | s register | ed office or registered agent, or both, | |
| SIGNATU | RE: | | | | | | |
| Electronic Signature of Registered Agent | | | l Agent | | | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | | | |
| OFFICERS | S AND DIREC | TORS: | AD | DITION | S/CHANG | SES TO OFFICERS AND DIRECTOR | |
| Title: Name: Address: City-St-Zip: | ST (WOLF, ABRAH FOUR DUNDAI HAZLET, NJ 0 | L PLACE | | | | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VPDS (LEKIC, CARL 1540 BEN FRA SARASOTA, FI | | | | | () Change () Addition | |
| Title: Name: Address: | (|) Delete | Title Nar Add | | VP MERIAM, I 230 PARK | () Change (X) Addition HAROLD (AVENUE SUITE 659 | |

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.

City-St-Zip:

NEW YORK, NY 10169

SIGNATURE: CARL LEKIC VPDS 03/13/2009