## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # G41008  1. Entity Name SANDICO, INC.	· ·		Sec	cretary of State	
2 ALHAMBRA PLAZA - PENTHOUSE II-B -	A PLAZA - 2 ALHAMBRA PLAZA II-B - PENTHOUSE II-B				
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent		CE	01062005 No Chg-P  4. FEI Number 59-2294257  5. Certificate of Status Desired	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required	
SPENCER, THOMAS R JR. 2 ALHAMBRA PLAZA PENTHOUSE II-B MIAMI, FL 33134	<del>-</del>		DO NOT W IN THIS SP	PACE	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable  DATE  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	Election Campaign Finar     Trust Fund Contribution.		.00 May Be ed to Fees		
10. OFFICERS AND DIRE   TITLE	CTORS			0181978 -90010-002 150.00	
ITILE P NAME STEEN, KUNIGUNDE C STREET ADDRESS 1632 S. BAYSHORE CT. MIAMI, FL 33133	· .				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
NAME STREET ADDRESS GITY-ST-ZIP		\$11.01 Ar		ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
ITILE NAME STRET ADDRESS CITY-SI-ZIP  12. I hereby certify that the information supplied with this indicated on this report or supplemental report is true.	filing does not qualify for the exe	mption stated in Se	oction 119.07(3)(i), Florida Statutes.	further certify that the information	

2. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 113.07(3)(i) reformed stated in the Certify that the information supplied with this filling does not qualify for the exemption stated in Section 113.07(3)(i) reformed stated in the certification of this 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 10 or Block 11 if changed, or on an attachment with an address with all other life empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 1/14/04 4464