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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H92106

(4)

SONOBOLINCORPORATED

Principal Place of Business Mailing Address						1 1881844 8319 18618 1886 93041 00448 0414	 	ANDII GIRIA DADAI	
BOYNTON BCH		20812 RAINDANCE LN BOCA RATON FL 33428-1 US	20812 RAINDANCE LN BOCA RATON FL 33428-1136						
						3. Date Incorporated or Qualified 12/19/1985		ate of Last Re 01/1996	eporl
 -	lace of Business		2s. Mailing Address			4. FEI Number Applied For			
Suite, Apt.	# otc	26 Suite, Apt. #, etc.	Suite Apt # etc			59-2618729 Not Applicable \$8.75 Additional			
22		27	27			5. Certificate of Status Desired L.J Fee Required			
City & State		City & State	<u>├</u>			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	├ -┐			8. This corporation has liability for	ntangible	tax under s	. 199.032,
24	25						M Yes □ No		
	g, Name and Address of Curre	ent Registered Agent		81	Name	10. Name and Address of New Re	gisterea	Agent	
	I-GAL, NOAM		VI Name						
	B RAINDANCE LN CA RATON FL 33428		82 Street Addre			ss (P.O. Box Number is Not Acceptab	ile)		
ВОС	A MATUR PL 33420		Ì	63					
			1		<u> </u>			12-1 7	0-4-
				84	City		FL	85 Zip (Code
office or re	to the provisions of Sections 607.09 egistered agent, or both, in the Sta m familiar with, and accept the obli	le of Florida. Such change was	authorized	lbvt	named corpo he corporation	oration submits this statement for the pon's board of directors. I hereby accep	urpose o of the app	r changing it pointment as	s registered registered
SIGNATURE	m partings with and dopopt the son	gonona an occusi oct tocca, i		•					
SIGNATURE	Signature, typed or printed name of registered a	* 		Agent	signature require	d when reinstating)	DATE		
12.		NO DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	RS IN 12 Addition
TITLE	<u></u>		1.1 TIT 1.2 NA					L_J Change	L MOUNION
NAME Street address	BEN-GAL, NOAM 20812 RAINDANCE LN.				DORESS				
	BOCA RATON FL			NCE 1 AI Y-\$T-					
CITY-ST-ZIP TITLE	DOOR INTOIT I	DELETE			· ŁII			Change	Addition
NAME		-	2.2 NAME						
STREET ADDRESS			2351	REET AI	DORESS				
CITY-ST-ZIP			2. 4 CI	14-81	- ZIP				
TITLE		DELETE	.ETE 3.1 TITLE					Change	☐ Addition
NAME			3.2 NA	MF					
STREET ADDRESS			3.3 \$1	REE1 AI	DORESS				
CITY-ST-ZIP				1Y-S1-	- ZIP				
TITLE		☐ DELETE	4.1 7(7					L Change	Addition
NAME			4. 2 N/						
STREET ADDRESS					DDRESS				
CITY-ST-ZIP		DELETE		IY-\$1-	ZIP			Change	Addition
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NAME STREET ADDRESS					.DDRESS				
CITY-ST-ZIP				nce i Ai IY-ST-					
TITLE		☐ DELETE	6.1 TIT		. TIL			Change	Addition
NAME			6.2 NA						
CTRECT ADDRESS					nnosee				

14. I do hereby certify that the information supplied with this filing does not quality 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 direction 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 33 if phanged, or on an attachment with an address.

6.4 DITY-ST-ZIP

4/22/97 561-488-55

FILED

May 01 1997 8:00am

Secretary of State

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