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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # J65543

BALANDRA INC.

FILED Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90062 006 ***150.00



Principal Place of Business Mailing Address						I (Maitin 6)10 6)101 attat attit Alben titt atatt åtnit atatt atatt atatt atatt atat.
1221 LEXINGTON COURT EL DORADO HILLS CA 95762			EL DORADO HILLS CA 95762			DO NOT MOTE IN THIS SPACE
U\$ U\$						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
						04/06/1987
2. Principal Place of Business 2a. Mailing Address						4, FEI Number Applied For
21		26				59-2264734 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip Cou			_	8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Yes VNo
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
DOYLE, PATRICK W.			ŕ	82	Street Addr	ress (P.O. Box Number is Not Acceptable)
800 WEST MORSE BLVD. SUITE 1						
WINTER PARK FL 32789				83		
•••••			Ţ	84	City	FL 85 Zip Code
44 Diverse	to the arminions of Postions 607 0503	and 607 1508 Florida Statu	tes the ah		a-named com	poration submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State o	of Florida. Such change was a	autnonzed	Dy '	tne corporation	on's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Flo	orida Statu	tes.	•	
SIGNATURE		Alot	C: Basistered	1000	t cionatura roquica	ad when reinstating) DATE
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	-gen	i signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TIT	I.F		Change Addition
NAME	ALBADA-JELGERSMA, ERIC		1.2 NA			
	1221 LEXINGTON COURT				ADDRESS	
STREET ADDRESS	EL DORADO HILLS CA		1.4 CIT			
CITY-ST-ZIP TITLE	CDS	☐ DELETE	2.1 TIT		1-211	☐ Change - ☐ Addition
ſ	ALBADA-JELGERSMA, FRITS		2.2 NA		- 1	•
NAME	1221 LEXINGTON COURT				ADDRESS	·
STREET ADDRESS	EL DORADO HILLS CA		2.4 CT			•
CITY-ST-ZIP	V	☐ DELETE	3.1 717		11-ZIF	☐ Change ☐ Addition
TITLE	MACKAY, JOHN D. L.		3.2 NA			_ • -
NAME	650 W GEORGIA ST 21ST FLO	OB			ADDRESS	
STREET ADDRESS	VANCOUVER B. V6B 4	U	3.4. CF			
CITY-ST-ZIP TITLE	V	☐ DELETE	4.1 TIT		11-4217	☐ Change ☐ Addition
NAME	Saunders, Roderick G.		4, 2 NA			
	650 W GEORGIA ST 21ST FLO	UB			ADDRESS	
STREET ADDRESS	VANCOUVER B. 46B 4	U11	4.3 ST			
CITY-ST-ZIP TITLE	WHOOPEN W. TOD T	☐ DELETE	5.1 TIT		, - eli	☐ Change ☐ Addition
NAME		_ : ====	5.2 NA			
					ADDRESS	·
STREET ADDRESS			5.4 CIT			
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TIT			· Change Addition
			6.2 NA			
NAME STREET ADDRESS					ADDRESS	

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 comporation 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 pranting or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP