SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J93079

in Block 12 or Block 13 if changed, or on an attachment with an addre

SIGNATURE:

SADS, INC.

Moiling Addrago

FILED Aug 26, 1999 8:00 am Secretary of State

08-26-1999 90002 039 ***550.00



9048760099

	e of Business						
8211-H BEACH BLVD.		8211-H BEACH BLVD.					
JACKSONVILLE	FL 32216	JACKSONVILLE FL 3221	JACKSONVILLE FL 32216		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	LIN THIS STACE		
2 Dringing D	lace of Business	2a. Mailing Address		09/21/1987 4. FEI Number	Applie	d For	
¬ /	6 VICTORI		6 incrora pr			oplicable	
21 Suite, Apt.		Suite, Apt. #, etc.	6 Million III	104 35 2000200	□ \$8.75 Addi	<u>.</u>	
22 Suite, Apt.	#, 0 10.	27 Suite, Apr. 4, etc.		5. Certificate of Status Desired	Fee Requi		
City & State		City & State		6. Election Campaign Financing	\$5.00 Ma		
33 - 1 - A - A	F	28	R	Trust Fund Contribution	Added to F	•	
207	Country	Zip	Country	8. This corporation owes the curre	-		
322	· · ·		30 45	Intangible Personal Property.	ves No	0	
	1 / 1 - 1	of Current Registered Agent	1	10. Name and Address of New Re	egistered Agent		
-			81 Name	David Cirosa	/		
SIFT	on, Paul		82 Street Ad	ddress (P.O. Box Number is Not Acceptab	-10)		
8211	-H BEACH BLVD.		62 Street Ad	diess (F.O. Box Number is Not Acceptate	Jie)		
JAC	(SONVILLE FL 32216		83	111 11 110 0 0	ask out	_	
	4		45	16 VICTORIA P.			
	• • •		84 City	2	FI 85 Zip Cod	e 6	
11. Pursuant	to the provisions of section	607 0502 and 607 1508 Florida State	utes the above-name con	poration submits this statement for the pur	roose of changing its registi	ered	
office or r	registered agent, or both, in	the State of Florida. Such change wa	s authorized by the corpora	ation's board of directors. I hereby accept	the appointment as registe	ered	
agent. i a	am familiar with, and accept	t the obligations of, section 607.0505,	Florida Statutes.				
					X-24-04		
SIGNATURE	Strangture broad a stranger of the	William and South William St.	(NOTE: Registered Adem someture of	zequired when reinstating)	8-24-99.		
			(NOTE: Registered Agent signature of	required when reinstating) ADDITIONS/CHANGES TO OFF	DATE	IN 12	
12.	OFF	CERS AND DIRECTORS	<u> </u>		DATE ICERS AND DIRECTORS	1	
12.	OFFI DP		13.		DATE	IN 12 Addition	
12. TITLE NAME	DP SIFTON, PAUL	CERS AND DIRECTORS	13. 1.1 TITLE		DATE ICERS AND DIRECTORS	1	
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