## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L13100

Entity Name: SALTY SAND, INC.

FILED Apr 19, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	EACH BLVD GUSTINE, FL	32084			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ΓE ROAD 16 STINE, FL 32	092			
FEI Number:	: 59-2974411	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
	AMILA R FE ROAD 16 STINE, FL 32	092 US			
	named entity of Florida.	submits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Agen	t	Date	
Election Car	npaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( PATEL, RAMU 2535 STATE F ST AUGUSTIN	ROAD 16	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD ( PATEL, RAMII 2535 STATE F ST AUGUSTIN	ROAD 16	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD ( GAVAN, RAMI 2535 STATE F ST AUGUSTIN	ROAD 16	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD ( GAVAN, HASU 2535 S.R. 16 ST. AUGUSTIN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( PATEL, SNEN 2535 S.R. 16 ST. AUGUSTIN		Title: VP Name: PATEL, SN Address: 2535 S.R. City-St-Zip: ST. AUGUS	16	
Title: Name: Address: City-St-Zip:	VP ( PATEL, SWAT 2535 S.R. 16 ST. AUGUSTIN		Title: Name: Address: City-St-Zip:	( ) Change() Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: SNEHAL R. PATEL VP 04/19/2005