

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N92000000965 (5)**

1. Corporation Name

THE SANCTUARY INC.



Principal Place of Business

Mailing Address

1304 E. ATLANTIC BLVD.
#C
POMPANO BCH. FL 33060

1304 E. ATLANTIC BLVD.
#C
POMPANO BCH. FL 33060

3. Date Incorporated or Qualified
12/21/1992

3a. Date of Last Report
02/15/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
65-0380515

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZAHAREK, ANDREW R
1304 C E ATLANTIC BLVD.
POMPANO BCH. FL 33060

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Andrew Zaherek
Signature, typed or printed name of registered agent and title if applicable.

ANDREW ZAHAREK VTD

04-16-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **ZAHAREK, ANDREW**
STREET ADDRESS **2742 N.E. 14TH STREET, #7**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **VTD** ☒ DELETE
NAME **FRIEDMAN, ROBERT**
STREET ADDRESS **1555 NW 81 AVE.**
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **D** ☐ DELETE
NAME **DILEO, DONNA**
STREET ADDRESS **2742 N.E. 14TH STREET, #7**
CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **DILEO, DONNA**
1.3 STREET ADDRESS **2742 N.E. 14TH STREET #7**
1.4 CITY-ST-ZIP **FT. LAUDERDALE, FL 33304**

2.1 TITLE **VTD** ☒ Change ☐ Addition
2.2 NAME **ZAHAREK, ANDREW**
2.3 STREET ADDRESS **2742 N.E. 14TH ST**
2.4 CITY-ST-ZIP **FT. LAUDERDALE, FL 33304**

3.1 TITLE **SD** ☒ Change ☐ Addition
3.2 NAME **GALLICHO, LAWRENCE**
3.3 STREET ADDRESS **3570 COCO PALM CIRCLE**
3.4 CITY-ST-ZIP **COCONUT CREEK, FL 33063**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Andrew Zaherek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDREW ZAHAREK

04-16-96
Date
954-565-3214
Daytime Phone #

CR2E037 (12/95)