## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000005654

Entity Name: MISSION SANDBOX, INC.

FILED Feb 12, 2007 Secretary of State

Current Principal Place of Business:			New Driveinel Diese	New Principal Place of Business:	
			New Principal Place		
SUITE 512	RCISSUS AVE 2 LM BEACH, F				
	lailing Addre		New Mailing Addres	:s:	
<del>-</del>					
SUITE 512	RCISSUS AVE 2 LM BEACH, F				
FEI Number	: 65-0866167	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:	
105 S. NAI SUITE 512	BRIDGEMAN RCISSUS AVE 2 LM BEACH, F	<u>.</u>			
The above in the State	e named entity e of Florida.	submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D ( THOMAS, CAR 344 PINEWOO LANTANA, FL	D ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SHALHOUB, R 1011 N. OLIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ROBERTS, CA 6708 PAMELA		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ZUCARRO, AL 777 S. FLAGLI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PINSKY, KIMB 701 KANUGA	) Delete ERLY EACH, FL 33401	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MITCHELL-BR 1617 N. FLAGI	) Delete IDGEMAN, ANITA .ER DR. #11-A .EACH. FL 33407	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 Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANITA MITCHELL-BRIDGEMAN PD 02/12/2007