2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000008795

1. Entity Name.
SARAH DANN, INC.

Principal Place of Business	Mailing Address
3670 S WESTSHORE BLVD TAMPA, FL 33629	3670 S WESTSHORE BLVD TAMPA, FL 33629

DO NOT WRITE IN THIS SPACE

01062004 No Chg-P CR2E034 (10/03)

4. FEI Number
01-0596475

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGELFELD, ALLEN V
501 EAST KENNEDY BLVD STE 1700
TAMPA, FL 33602

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8. n the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ _____ _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000110952
04/12/04-80103-024 1500.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DANN, RODNEY H JR
STREET ADDRESS	3670 S WESTSHORE BLVD
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rodney H Dann Jr RODNEY H DANN, JR 1-6-04 813 251 5100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #