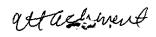
## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # PA 20000 35099



## **FILED** May 01, 2003 8:00 am Secretary of State 05-01-2003 90412 017 \*\*\*150.00

1. Entity Nan	ne	0 0001]							
SARDONYX46, INC.									
	DO NOT WRITE	IN THIS S	PAC			(			
2. Principal P	Place of Business	3. Mailing Address	· <u> </u>	· · · · · · · · · · · · · · · · · · ·					
3013 N. C	DAKLAND FOREST DR	3013 N. OAKLAND FOREST DR				•			
Suite, Apt. #, etc. #302		Suite, Apt. #, etc. #302			DO NOT WRITE IN THIS SPACE				
City & State OAKLAND PARK, FL		City & State OAKLAND PARK, FL			4. FEI Number 04 -3688177	Applied For Not Applicable			
<sup>Zip</sup> 33309	Country UNITED STATES	Ζiρ 33309	Count UNIT	ED STATES		.75 Additional Required			
					7. Name and Address of Current Registered Ag	jent			
	DO NOT WI	RITE		VVIL IX	ELSEY				
	IN THIS SP	그 강에 대한 장사는 병사 및 수다	그렇게 되어 있는 사람들이 하고 있다.		Street Address (P.O. Box Number is Not Acceptable)				
				3013 N. OAKLAND FOREST DR. #302					
				City OAKLAN	ND PARK FL	Zip Code <b>33309</b>			
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	ed office or register	ed agent, or both, in the State of Florida. I am fami	liar with, and accept			
	J J								
SIGNATURE .	Signature, typed or printed name of registered agent an	id title it applicable. (NOT	€: Registered	i Agent signature required	when reinstating) DATE				
	nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25				9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees			
Make Check	Payable to Florida Department of S  OFFICERS AND D	<del></del>	1 52 4 5						
TITLE :	Wil Kelsey - D	• •	TITLE						
NAME STREET ADDRESS	3013 N. Oakland Forest Dr.	<b>#</b> 302	NAME STREET	T ADDRESS	A CONTRACTOR OF THE STATE OF TH				
CITY-ST-ZIP	Oakland Park, FL 33309			ST ZIP					
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CITY-ST-ZIP				ST-ZIP					
NAME			TITLE	and the second					
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CITY-ST-ZIP		<del></del>	- 10.00	ST-ZIP		* *			
NAME		•	TITLE NAME						
STREET ADDRESS			1 1 1 1 1 1	T ADDRESS	ing the state of t				
CITY-ST-ZIP	ertify that the information supplied with the	his filing does not qualify for		ST-ZIP	ction 119.07(3)(i), Florida Statutes. Fourther certify t	hat the information			
indicated of the cor	on this report or supplemental report is to	rue and accurate and that n wered to execute this repor	ny signati	are shall have the s	ame legal effect as if made under oath; that I am a 17, Florida Statutes; and that my name appears in	n officer or director			



## FOR PROFIT CORPORATION

U	NIFO	RM BUSINE	SS REPORT	(UBR)	-	#p0	02000350	7.9		
DOCUMENT # P020000 35099  1. Entity Name  SARDONYX46, INC.										
	DO N	OT WRITE	IN THIS S	PACE						
2. Principal Place of Business 3.013 N. OAKLAND FOREST DR 3013 N. O				Address N. OAKLAND FOREST DR					•	
Suite, Apt. #, etc. #302			Suite, Apt. #. etc. #302			DO NOT WRITE IN THIS SPACE				
City & State OAKLAND PARK, FL			City & State OAKLAND PARK, FL			4. FE	Number 04-368817	7	Applied For Not Applicable	1
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						7. Nam	e and Address of Current F			
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			yang barang	Street	Address (	P.O. Box	( Number is Not Acceptable)	·		ì
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	named entity ons of regist		the purpose of changing its	registered office	or register	ed agen	t, or both, in the State of Flor	ida. I am fan	nillar with, and accept	
		or printed name of registered agent an	d title if applicable. (NOT	E: Registered Agent sig	alure required	when reins	tating)	DATE		
	After May 1 Amended	ay 1 Fee is \$150.00 ; Fee is \$550.00 UBR is \$61:25 Florida Department of S			·		Election Campaign Fina Trust Fund Contribution.		\$5.00 May Be Added to Fees	
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indicated of of the corp	on this report poration or th	t or supplemental report is tr	rue and accurate and that n wered to execute this repor	ny signature shall	have the s	ame leg	9.07(3)(i), Florida Statutes. I f al effect as if made under oa a Statutes; and that my nam	th; that I am	an officer or director	
SIGNATURE: 4/1/ Telos WIL KEKSEY 4/28/03 954-678-3505										
SIGNAL	U11C	SIGNATURE AND TYPED OR PER	NTED NAME OF SIGNING OFFICER		<i>_</i>		Dale	Dayti	me Phone #	