


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

FILED
Jun 09, 2004 8:00 am
Secretary of State

06-09-2004 90001 023 ***150.00

DOCUMENT # P02000087753	
1. Entity Name SUNDRA CORP.	

DO NOT WRITE IN THIS SPACE

44046328

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 741 NE 71st STREET Suite, Apt. #, etc.		3. Mailing Address 741 NE 71st STREET Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33138	Country USA	Zip 33138	Country USA
4. FEI Number 06-1679002		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name SANDRA SIMIONI
Street Address (P.O. Box Number is Not Acceptable)
741 NE 71st STREET
City MIAMI, **FL** **Zip Code** 33138

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **SANDRA SIMIONI** **05/28/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.) DATE

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE PRES
NAME SANDRA SIMIONI
STREET ADDRESS 741 NE 71st STREET
CITY-ST-ZIP MIAMI, FL 33138

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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 on an attachment with an address, with another like empowered.

SIGNATURE:  **SANDRA SIMIONI** **PRESIDENT** **05/28/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

Attachment

44046328 ✓

SUNDRA CORP.

741 NE 71st STREET

MIAMI, FL 33138

May 28, 2004

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Doc # P02000087753

Dear Sir:

Enclosed please find a check for \$150.00 to cover the annual report fee for CY 2004 along with a completed UBR form. I never received the form.

Please accept this check in good faith. I was not aware of the form until my accountant brought it up to my attention. I sincerely hope that you would take this into consideration.

Thank you.

Very truly yours,


SANDRA SIMIONI
President