

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90012 043 ***150.00

DOCUMENT # P03000137336

1. Entity Name
SANDS INSTITUTE, INC.



Principal Place of Business
5050 10 AVE. N
A
GREENACRES, FL 33463

Mailing Address
5050 10 AVE. N
A
GREENACRES, FL 33463

40038908



2. Principal Place of Business - No P.O. Box #

1300 S. Arlington Ridge Rd

Suite, Apt. #, etc.
#204

City & State
Arlington, VA

Zip
22203

Country
USA

3. Mailing Address

1300 S. Arlington Ridge Rd

Suite, Apt. #, etc.
#204

City & State
Arlington, VA

Zip
22203

Country
USA

03142007 Chg-P CR2E034 (12/06)

4. FEI Number
30-0217600

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SANDS, RICARDO A
1123 CRESTWOOD BLVD
SUITE D
LAKE WORTH, FL 33460

7. Name and Address of New Registered Agent

Name
Sands, Ricardo A
Street Address (P.O. Box Number is Not Acceptable)
124 Ainsworth Circle
City
Lake Worth FL Zip Code
33461-2016

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

3/16/07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
SANDS, RICARDO A
5050 10TH AVE NORTH STE A
LAKE WORTH, FL 33463 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
SANDS, ANA M
5050 10TH AVE N STE A
LAKE WORTH, FL 33463 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
SANDS, MIRIAM RAQUEL
5050 10TH AVE N STE A
LAKE WORTH, FL 33463 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
Sands, Ricardo A
124 Ainsworth Circle
Lake Worth, FL 33461-2016 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Sands, Ana M
124 Ainsworth Circle
Lake Worth, FL 33461-2016 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Sands, Miriam Raquel
124 Ainsworth Circle
Lake Worth, FL 33461-2016 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ricardo Sands, PST

3/16/07

Date

703 5778424

Daytime Phone #