

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **PC4000116165**

1. Entity Name

SANKEE, INC.

FILED

08 NOV 14 AM 11:15

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business
**1531 SW 13 CT
FORT LAUDERDALE FL 33312**

Mailing Address
**1531 SW 13 CT
FT LAUDERDALE FL 33312**

REINSTATEMENT 08

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 20-1528346		Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent THE LAW OFFICE OF KIRK GIRRBACH PA 2950 W CYPRESS CREEK ROAD SUITE 101 FORT LAUDERDALE FL 33309		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back.) ☐

FILE NOW!!! FEE IS \$150.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP P KEESLING PATRICIA 1531 SW 13 CT FORT LAUDERDALE FL 33312	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 300137927643 11/14/08--01043--005 **150.00	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP S OLSEN ANN 1531 SW 13 CT FORT LAUDERDALE FL 33312	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D KEESLING LAWRENCE 1531 SW 13 CT FORT LAUDERDALE FL 33312	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CP2ED24 (11/1/00)

2082

**SANKEE, INC.
1531 SW 13TH COURT
FORT LAUDERDALE FL. 33312**

November 11, 2008

Division of Corporations
Annual Report Section
P.O. Box 6327
Tallahassee, FL 32314

REF: SANKEE, INC.
DOCUMENT# P04000116165

Dear Sir or Madam:

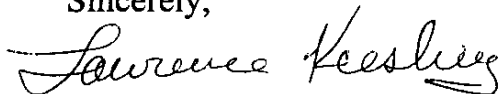
Please be advised that the above-mentioned corporation annual report was never received for timely submission.

Therefore, we are requesting that the delinquent fees be waived and that the corporation is allowed to submit a second annual report with the corresponding fee of \$ 150.00

Please advice.

Your cooperation is appreciated.

Sincerely,



Lawrence Keesling
Director