2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000101595

Entity Name: SANDOZ, INC.

FILED Jun 22, 2009 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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20020 VETERANS BLVD 530 US HWY 41 BYPASS

SUITE 12 SUITE 4A

PORT CHARLOTTE, FL 33954 US VENICE, FL 34285 US

Current Mailing Address: New Mailing Address:

20020 VETERANS BLVD 21007 BACHMANN BLVD

SUITE 12 PORT CHARLOTTE, FL 33954 US

PORT CHARLOTTE, FL 33954 US

FEI Number: 26-3740694 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANDOZ, LUCIA
SANDOZ, LUCIA
20020 VETERANS BLVD
21007 BACHMANN BLVD
2007 OLIABIOTE EL 2007 A LIA

SUITE 12 PORT CHARLOTTE, FL 33954 US PORT CHARLOTTE, FL 33954 US

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: 06/22/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 SANDOZ, CHARLES
 Name:

 Address:
 21007 BACHMANN BLVD
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33954 US
 City-St-Zip:

Title: VST () Delete Title: VST (X) Change () Addition

 Name:
 SANDOZ, LUCIA
 Name:
 SANDOZ, LUCIA

 Address:
 20020 VETERANS BLVD SUITE 12
 Address:
 21007 BACHMANN BLVD

 City-St-Zip:
 PORT CHARLOTTE, FL 33954 US
 City-St-Zip:
 PORT CHARLOTTE, FL 33954 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCIA M SANDOZ VP 06/22/2009