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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katnerine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT #

1. Corporation Name

P17598

Sanford Holdings, Inc.

FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90042 023 ***150.00

Principal Place of Business	Mailing Address					
2050 N. Woodward	2050 N. Woodw	ard				
Suite 310 Suite 310				DO NOT WRITE IN	THE PRACE	
Bloomfield Hills, MI Bloomfield Hi		11g MT		DO NOT WRITE IN THIS SPACE		
48304-2260 USA	48304-22 6 0 US		_	3. Date Incorporated or Qualifed		
2. Principal Place of Business				01/11/1988	, , ,	
⊢ ′	2a. Mailing Address			4. FEI Number	├ - -	Applied For
Suita And Hart	26	_		38–2581946		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional
22 City 8 C4-44	27	_			····	Required
City & State	City & State			6. Election Campaign Financing	•	0 мау Ве
23	28	Country		Trust Fund Contribution		d to Fees
. Zip Country	├ ─ ─ `	Country_				
24 25	29 Current Registered Agent	30		Personal Property Tax.	☐ Yes	□No
	-	81	Name	10. Name and Address of New Registe	erea Agent	
Corporation Service Com	npany	"	INAILIE			
1201 Hays Street		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
Tallahassee, FL 32301-	-2607					
		83				
		84	City	· · · · · · · · · · · · · · · · · · ·	85 Zij	Code
			Oity		FL ° ′ ′ ′ ′	0000
agent. I am familiar with, and accept the	e obligations of, Section 607.0505, Flori	ida Statutes.	ie corporatio	on's board of directors. I hereby accept the a	ppointment as	egistered
	stered agent and title if applicable (NOTE:					
Signature, typed or printed name of regis	ittos agont ana tito ii applicable (1401E;	Registered Agent	signature required	d when reinstating) DAT	E	
12. OFFICE	ERS AND DIRECTORS	13.	signature required	d when reinstating) DAT ADDITIONS/CHANGES TO OFFICER		FORS IN 12
			signature required			
12. OFFICE	ERS AND DIRECTORS	13.	signature required		S AND DIREC	
12. OFFICE TITLE S/T NAME John R. Selecky	RS AND DIRECTORS	13. 1.1 TITLE			S AND DIREC	
12. OFFICE TITLE S/T NAME John R. Selecky STREET ADDRESS 2050 N. Woodwar	ERS AND DIRECTORS DELETE d Ave.; Suite 310	13. 1.1 TITLE 1.2 NAME	ADDRESS		S AND DIREC	
12. OFFICE TITLE S/T NAME John R. Selecky STREET ADDRESS 2050 N. Woodwar CITY-ST-ZIP Bloomfield Hill	RS AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET /	ADDRESS		S AND DIREC	e ∏ Additio
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SIGNATURE: &

SIGNATURE AND TYPED OR PRINTED NAME OF GIGNING OFFICER OR DIRECTOR

John R. Selecky

1/29/59 248-Daytime Ph

248-540-5760 Daytime Phone # CR2E034 (11/98)