FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000014249 1. Corporation Name

SANDY RAY CORPORATION

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90100 002 ***150.00



					1 Identical tre raise tres care care		
Principal Place of Business Mailing Address							•
210 ULMERTON F		7210 ULMERTON ROAD	- · · ·				
SUITE J		SUITE J			DO NOT WRITE IN THIS SPACE		
ARGO FL 33771		LARGO FL 33771			3. Date Incorporated or Qualifed		
					02/17/1993		
		La Marilla e Addroop			4. FEI Number		ed For
2. Principal Plac	e of Business	2a. Mailing Address			59-3170965	Not A	pplicable
:1	26			,	\$8.75 Ad		
Suite, Apt. #, etc.					5. Certifcate of Status Desired	Fee Requ	ired
12		27			6. Election Campaign Financing	\$5.00 M	ay Be
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution Added to Fees			
23		Zip Country		This corporation owes the current year I	ntangible		
Zip	Country	Zip	1	'y	Personal Property Tax.	☐ Yes _ □	No
24	25	29 30	Щ-		10. Name and Address of New Registere	d Agent	
<u></u>	9. Name and Address of Curre	t Registered Agent		1 Name	10. Name and	_	ļ
			١				
TASSILLO, RAYMOND				Street Add	ress (P.O. Box Number is Not Acceptable)		
7210 ULMERTON ROAD					2 2 2 3 4 2 4 3 7	265,33 300	115 KH 1381
SUITE J			8	33	· · · · · · · · · · · · · · · · · · ·	新聞 編譯學	经制度
LARGO FL 33771			\ \	34 City		85 Zip Ci	ode
					poration submits this statement for the purpose ion's board of directors. I hereby accept the app		
SIGNATURE 3	Signature, typed or printed name of registered ag	Citt died met FF		gent signature requir	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
12.	OFFICERS A	ND DIRECTORS	13.		Abbinoncioninos	Change	☐ Addition
TITLE	P	☐ DELETE	1.1 TIT	\ \	·		ļ
NAME	TASSILLO, SANDRA		1.2 NA	l l			
STREET ADDRESS	7210 ULMERTON ROAD, SUI	ΓÉ J	B	REET ADDRESS			ļ
CITY-ST-ZIP	LARGO FL 33771			Y-ST-ZIP		Change	☐ Addition
TITLE		☐ DELETÉ	2.1 TIT	LE	•	_	
			2.2 NA	ME .			
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STREET ADDRESS				TREET ADDRESS	•		
STREET ADDRESS	1		6.4 0	ITY-ST-ZIP			information

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: