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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

FILED

Apr 02 1997 8:00am

Secretary of State

0011570

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000070657 (0)

SANDROSE GROUP, INC.

appears in Block 12 or Blg

SIGNATURE:

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or on an attachment with an address.

OR PRINTED NAME OF SIGNING OF

Principal Place of Business Mailing Address 2870 PEACHTREE RD 2870 PEACHTREE RD SUITE 104 SUITE 104 ATLANTA G 30305-2918 ATLANTA G 30305 3a. Date of Last Report 3. Date Incorporated or Qualified 10/04/1993 05/01/1996 2. Principal Place of Business 4. FEI Number Applied For 2a. Mailing Address 2258 GOODWOOD 65-0443664 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be SMYRNA GA 23 Trust Fund Contribution Added to Fees 28 Country Country $Z_{i}p$ 8. This corporation has liability for intangible tax under s. 199.032, 30080 9. Name and Address of Current Registered Agent Florida Statutes Yes 30 0. Name and Address of New Registered Agent Name SANDER, STANLEY R 19707 WATERS POND LN Street Address (P.O. Box Number is Not Acceptable) #402 83 **BOCA RATON FL 33434** City 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Sign if ne, type if an product name of registered age is and title if applicable (NOTE Registered Agent signature required w ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. (96/6) 12. DELETE Change Addition 1.1 TITLE THEF SANDER, RICHARD M CR2E034 NAME 1.2 NAME 2870 PEACHTREE RD STE 104 1.3 STREET ADDRESS STREET ADDRESS ATLANTA GA 30305 1.4 CITY-ST-ZIP CITY-ST-ZiP Addition DELETE Change 2.1 TITLE HILE ROSENBERG, DAVID S 2.2 NAME NAME 2870 PEACHTREE RD STE 104 2 3 STREET ADDRESS STREET ADDRESS ATLANTA GA 30305 CHY-ST-7IP 2 4 CITY - ST - ZIP DELETE ☐ Change Addition 3.1 TITLE 111116 3.2 NAME NAME JOHNS, PETRA 2870 PEACHTREE RD, SUITE 104 3.3 STREET ADDRESS STREET ADDRESS atlanta ga 3.4. CITY-ST-ZIP CITY-ST 7P Addition DELETE ☐ Change 11/11 4.1 TITLE NAM: 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY \$1 712 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition Total NAME 5.2 NAME 5.3 STREET ADDRESS STREE! ADDRESS 5.4 CITY-ST-ZIP C-11-51 DELETE 6 1 TITLE Change Addition TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CHY-ST-Zif 14. I do 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 aurtiral report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an other or director of the corporation or the receiver or truestee employees as Report as required by Chapter 607, Florida Statutes; and that my name