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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

\$andra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000077126 (9)

S B SONS, INC.

Principal Place of Business
SUITE 8 JUPITER FL 33458 SUITE 9 JUPITER FL 33458 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Mailing Address 2c. Mailing Address 4. FEI Number 65-0482617 Not Applicable 56-0482617 Not Applicable 57-0482617 Not Applicable 58.75 Additional 58. Election Campaign Financing 58.75 Additional 58.75
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2. Mailing Address 2a. Mailing Address 4. FEI Number Applied For 2. Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. Suite, Apt #, etc. Suite, Apt #, etc. 2. City & State Suite, Apt #, etc. 2. Country Suite, Apt #, etc. 2. Suite, Apt #, etc. 2. City & State Suite, Apt #, etc. 3. Name and Address of New Registered Agent 3. Name 3. Name 3. Name 3. Name 3. Name 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address of Greet is appointment as registered agent I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 3. STREET ADDRESS 19576 TRAILS END TERR. 3. STREET ADDRESS
27 Suite, Apt. #, etc. City & State City & State 28 City & State 29 Suite, Apt. #, etc. City & State City & State City & State City & State Country Zip Country Zip Country R. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent PATEL, ASHOK 450 S. OLD DIXIE HIGHWAY SUITE 8 JUPITER FL 33458 84 City FL 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 agent. I am femiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or preferd name of registered agent and the diagnosisted agent agent and the diagnosisted agent age
Suite, Apt. #, etc. Suite, Apt. #, etc.
Title Post and Control of Status Desired
Trust Fund Contribution
Zip Country Zip Country
PATEL, ASHOK 450 S. OLD DIXIE HIGHWAY SUITE 8 JUPITER FL 33458 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. PICE Registered Agent of City FL 85 Signature 12. Off ICERS AND DIRECTORS TILE PST DELETE 13. SIREET ADDRESS PATEL, ASHOK 450 S. OLD DIXIE HIGHWAY SUITE 8 JUPITER FL 33458 14. City FL 85 Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 14. 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 agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 15. Off ICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PST DELETE 11. TITLE PATEL, ANKUR 11. SIREET ADDRESS 13. SIREET ADDRESS 13. SIREET ADDRESS
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PATEL, ASHOK 450 S. OLD DIXIE HIGHWAY SUITE 8 JUPITER FL 33458 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITTLE PST DELETE 1.1 TITLE PATEL, ANKUR 12 NAME 13 STREET ADDRESS 19578 TRAILS END TERR. 1.3 STREET ADDRESS
SUTTE 8 JUPITER FL 33458 82 Street Address (P.O. Box Number is Not Acceptable) 83 PL Street Address (P.O. Box Number is Not Acceptable) 84 City FL B5 Zip Code 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 86 City FL B5 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 agent. I am familiar with, and accept the appointment as registered agent familiar with, and accept the appointment as registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. TITLE 12. PST PATEL, ANKUR 12. NAME 13. STREET ADDRESS 19578 TRAILS END TERR. 1.3 STREET ADDRESS
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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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE
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 agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE PST PATEL, ANKUR 12. DELETE 1.1 TITLE PST PATEL, ANKUR 12. DELETE 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS
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NAME 4.2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-ST-ZIP 4.4 CITY-ST-ZIP TRUE DELETE 5.4 TITLE Change Addition
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14. Thereby 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 furstee 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.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.4 CITY-ST-ZIP

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

TITLE

NAME

(8labata

3125198

561-747 - 8246

Change Addition

FILED

Mar 30 1998 8:00am

Secretary of State