## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400066791 (2)

SANDRA L. WINTERS, INC.

97 AUG 20 PH 3: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place	e of Business	Mailing Address		( 10011001 101 10111 01011 00111 00111	i maile motio Otili (Odio odobi ilibi (Odi
229 NE 101 ST 229 NE 101 ST					
MIAMI SHORES FL 33138 MIAMI SHORES FL 33138				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	3a. Date of Last Report
				09/07/1994	06/22/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 ART I	xbt DW 387	26 40 anita Co	intine #5	65-0525380	Not Applicable
Sulte, Apt.	# elect (= 111)	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 10 7th 5 and 8th street 27 173 1720131 51				U. Commond of States Desired	Fee Required
Chy & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 MIAI		120 17 33 1	0	Trust Fund Contribution	Added to Fees
Zip	Country 25 Dada	Zip 29 10038	Country 30 manhattan	8. This corporation owes or has paid	
24 33/	9, Name and Address of Currer		30 H Brownacore	Personal Property Tax due June : 10. Name and Address of New Reg	
Win	ITERS, SANDRA L	10. Hallo and Hadrood of Hall Hag	10.000		
990 NE (0) 9T					
MIAMI SHORES FL 33138					
83 ,					<u> </u>
				-08/21/9	701087004
			84 City	帐帐帐 165	.0 <del>0</del> ***********************************
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					
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, Soction 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AN	······································	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Winters, Sandra L		1.2 NAME		f
STREET ADDRESS	229 NE 101 ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI SHORES FL 33138		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE	1.21.21.21.4.21	Change Addition
NAME			2.2 NAME	0000022 -08/21/9	7701087005
STREET ADDRESS			2.3 STREET ADDRESS	******	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	முருக்குக்கிற	1.75 ******8.75
TITLE		DELETÉ	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP	Na	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME	<b>7</b>	
STREET ADDRESS			5.3 STREET ADDRESS		$\omega$
CITY-ST-ZIP			5.4 CITY-ST-ZIP	(). U.A. 812.	
TITLE		DELETE	6.1 TITLE	DIO	Change Addition
NAME			6.2 NAME	8120	719 <i>†</i>
STREET ADDRESS			6.3 STREET ADDRESS	7	/ ' '
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
44 I do horok	ou earlifu that the information cumplic.	d with this filing door not qualify	for the everetion states	d in Contine 110 07(9\(ii) Electric Statutes	I described a model of the state of the stat

I do nereby certify that the information supplied with this filling 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 131 changed, or on an attachment with an address.

August 1997

FEI #65-0525380

Florida Department of State 1997 Profit Corporation Annual Report Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Authorities,

Unfortunately, I was traveling when these notices first came out. The person that was house sitting for me must have inadvertently thrown out my form. I am now working on a project in Massachusetts and just received this second notice. When I called the Division of corporations, I was told to pay \$165.00 and to write a letter explaining the situation. I do hope under the circumstances I can have the penalty waived.

Please let me know as soon as possible the status of my bill. Thank you for your consideration and please forgive for my delinquence.

Sincerely,

Sandra L. Winters, INC 193 Front Street, #5

Thinters

NY, NY 10038

212-809-8249 413-528-4934