

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

FILED  
Feb 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000090484 (4)**

1. Corporation Name  
**SANCO I, INC.**



Principal Place of Business  
**1200 CORPORATE CENTER WAY STE. 100  
WELLINGTON FL 33414**

Mailing Address  
**18743 LONG LAKE DR.  
BOCA RATON FL 33496-1908  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**12/14/1994**

2. Principal Place of Business  
21 **18743 LONG LAKE DR.**  
Suite, Apt #, etc.

2a. Mailing Address  
26  
Suite, Apt #, etc.

4. FEI Number  
**65-0541373**  
Applied For  
Not Applicable

22  
City & State  
**BOCA RATON, FL**

27  
City & State  
Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

23  
Zip  
**33496-1908**

25  
Country  
**U.S.**

29  
Zip  
Country

8. 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

10. Name and Address of New Registered Agent

**SANDS, DONALD A  
1200 CORPORATE CENTER WAY STE. 100  
WELLINGTON FL 33414**

81 Name  
**DONALD A. SANDS**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**18743 LONG LAKE DR.**  
83  
84 **BOCA RATON** FL 85 **33496-1908**

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, typed 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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
SANDS, DONALD A  
C/O 1200 CORPORATE CENTER WAY STE. 100  
WELLINGTON FL 33414**

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
**18743 LONG LAKE DR  
BOCA RATON, FL 33496-1908**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

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.

SIGNATURE: 

2/4/98 561 883 6460

CR2E034 (10/97)