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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000010005 (3)

DITCH 5 SAND MINE, INC.

FILED Apr 24 1998 8:00am Secretary of State

Principal Place	of Business	Mailing Address		I HABINABI ATB KATA BANTI BAN	ir Bakir Odiol Iidii Adiii 64kir Obiol Olii 1891
22200 STATE ROAD 60 POST OFFICE BOX 29					
VERO BEACH	FL 32986	VERO BEACH FL 3269	ļ	DO NOT WR	ITE IN THIS SPACE
				3. Date Incorporated or Qualifie	
				02/07/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26		65-0554279	Not Applicable
SUITE, APT. 3	w, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3	City & State		6. Election Campaign Financing	
:3		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation owes or has	paid the current year Intangible
4	25	29	30	Personal Property Tax due Ju	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New	Registered Agent
	BB, WILLIAM M		81 Name	nnald Sales	
	200 STATE ROAD 60		B2 Street	Addrese (P.O. Box Number) is Not Accep	erole) On
VEI	RO BEACH FL 32966		100	I Forum Place,	Dute 400
			B3		
			84 City	1 Palma Rossia	85 3ip Cqde 1
			wes	Fram Deach	FL DOTO
11, Pursuant to office or re	o the provisions of bactions 607.05 egistered edent, of both, in the Sta	502 and 607.1508, Florida Statu ite of Florida. Such change was	ites, the above-named authorized by the corp	corporation submits this statement for the poration's board of directors. I beenby a	e purpose of changing its registered cept the a main ment as registered
agent. I ar	m family a with, and accept the obt	ligations of, Section 657.0505, F	lorida Statules.	2/	5/78
	/				
			of facilities Assets	-	63.70
	Signature, typed or printed name of registered a OFFICERS A	·	OTE Registered Agent signature		DATE FICERS AND DIRECTORS IN 12
12.	· · · · · · · · · · · · · · · · · · ·	agent and line if applicable (NC NDD DIRECTORS DELETE	DIE Registered Agent signature 13. 1.1 TilLE		FICERS AND DIRECTORS IN 12
12.	OFFICERS A	ND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
12. TITLE	OFFICERS A	ND DIRECTORS	13. 1.1 TITLE		FICERS AND DIRECTORS IN 12
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12. Title NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD COBB, WILLIAM 22200 STATE ROAD 60	ND DIRECTORS	13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change Addition
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indicated on this annual report or supplemental annual report is true and according 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 changes, or or an attachment with an address.

SIGNATURE