FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000026392	(7)
1. Corporation Name		` '

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SANDY	I'S LEARNING CENTER, IN	IC.				E HADDINDO HAD HADDAN DOUGH ADDIN	N BANK BAKID KURU	BALDA ANNA KANIA ALAH MARI
EN Control Finance								
Principal Place		Mailing Addres	S					
15923 NO. FLORIDA AVENUE 15923 NO. FLORIDA AVENUE LUTZ FL 33549 LUTZ FL 33549								
						3. Date Incorporated or Qualified 03/30/1995	3a. Date of	f Last Report
2. Principal Pla 1]	ace of Business	2a. Mailing Add	dress			4. FEI Number 59 - 33 o 56 5	4	Applied For Not Applicable
Suite, Apt. : 2	#, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	0	City & State	_			6. Election Campaign Financing		\$5.00 May Be
3		28				Trust Fund Contribution		Added to Fees
. Z ijo . 1	Country	Zip		Country	<i>(</i>	8. This corporation has liability for		under s. 199.032,
1	25 9. Name and Address of Currer	29 29 Anen	30	10		Florida Statutes	s 🔲 No Registered As	ent .
	5. Name and Address or ourse	it tiegistereo Agon	·	81	Name	IV. Hame and Addition of How	riogisterou Ag	joilt
NEWCO	MER, SANDRA			-	01	Land (D.C. David) and a black for a second	h la)	
	NO. FLORIDA AVENUE			82	Street Add	ress (P.O. Box Number is Not Accepta	(DIB)	
LUTZ FL				83				
				84	City			85 Zip Code
					L		FL	
or register familiar wi	red agent, or both, in the State of Fiori itin, and accept the obligations of, Sect	ida. Such channe wa	s authorized h	y the corp	oration's boa	oration submits this statement for the purification accept the apparent of directors. I hereby accept the apparent	pointment as re	gistered agent. I am
SIGNATURE	Signature, typed or printed came of registered agis-	CONTRACTOR OF THE RESEARCH STREET	(NOTE F	legistered Age	nt signature require	ad wher: reinstatico)	DATE	
12.	OFFICERS AN				-			•
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14. For nevery certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information inclosed 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 cath; that I am an officer or director of the corporation on 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 12 or Block 12 or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Description 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifier to the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certifiers of the exemption of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certif