

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**  
**AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION  
 ANNUAL REPORT  
 1996



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P95000041566 (7)  
 1. Corporation Name

SANDENT CONSTRUCTION CORP.



Principal Place of Business Mailing Address  
 4 WEST POINT DR COCOA FL 32931 4 WEST POINT DR COCOA FL 32931

3. Date Incorporated or Qualified 05/22/1995 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 11-2804159 Applied For Not Applicable

21 1800 S. ATLANTIC Ave 26 1800 S. ATLANTIC Ave 5. Certificate of Status Desired \$8.75 Additional Fee Required

22 COCOA BEACH FL. 27 COCOA BEACH FL. 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 COCOA BEACH FL. 28 COCOA BEACH FL. 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes [X] No

24 32931 25 Brevard 29 32931 30 Brevard 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

MARKEY, KEVIN P  
 15 E MERRITT ISLAND CSWY  
 SUITE 307  
 MERRITT ISLAND FL 32952

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 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 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 type or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when re-instating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D [ ] DELETE	1.1 TITLE	[X] Change [ ] Addition
NAME	LENT, JAMES	1.2 NAME	LENT, JAMES
STREET ADDRESS	4 WEST POINT DR	1.3 STREET ADDRESS	35 WEST POINT DR.
CITY-ST-ZIP	COCOA FL 32931	1.4 CITY-ST-ZIP	COCOA BEACH FL. 32931
TITLE	D [ ] DELETE	2.1 TITLE	[X] Change [ ] Addition
NAME	LENT, SANDRA	2.2 NAME	LENT, SANDRA
STREET ADDRESS	4 WEST POINT DR	2.3 STREET ADDRESS	35 WEST POINT DR.
CITY-ST-ZIP	COCOA FL 32931	2.4 CITY-ST-ZIP	COCOA BEACH, FL. 32931
TITLE	[ ] DELETE	3.1 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	
TITLE	[ ] DELETE	5.1 TITLE	[ ] Change [ ] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	[ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James H. Lent James H. Lent VP 6/7/96 407 799-9900  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTON, FLORIDA #

CR2E034 (3/96)