

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 # P95000079189 (3)

1. Corporation Name

SANDHURST EQUITY CORPORATION



Principal Place of Business

888 EAST LAS OLAS BLVD.
3RD FLOOR
FORT LAUDERDALE FL 33301

Mailing Address

888 EAST LAS OLAS BLVD.
3RD FLOOR
FORT LAUDERDALE FL 33301

2. Principal Place of Business

21 915 MIDDLE RIVER DR.

Suite, Apt. #, etc.

22 SUITE 310

City & State

23 FT. LAUDERDALE, FL

Zip

24 33304

Country

25 BROWARD

2a. Mailing Address

26 915 MIDDLE RIVER DR.

Suite, Apt. #, etc.

27 SUITE 310

City & State

28 FT. LAUDERDALE, FL

Zip

29 33304

Country

30 DROWARD

3. Date Incorporated or Qualified

10/13/1995

3a. Date of Last Report

4. FEI Number

65-0630173

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name
Desmond Levin
82 Street Address (P.O. Box Number is Not Acceptable)
915 MIDDLE RIVER DRIVE
83 SUITE 310
84 City
FT. LAUDERDALE
85 Zip Code
FL 33304

11. Pursuant to the provisions of Sections 607.002 and 607.1505, 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 of person authorized to change registered office or agent

Signature of person authorized to change registered office or agent

DATE

7-8-96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D LEVIN, DESMOND
STREET ADDRESS
888 EAST LAS OLAS BLVD., 3RD FLOOR
CITY-ST-ZIP
FORT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME
D BRUMLIK, DONALD J
STREET ADDRESS
888 EAST LAS OLAS BLVD., 3RD FLOOR
CITY-ST-ZIP
FORT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
PRESIDENT, DIRECTOR
TREASURER
1.3 STREET ADDRESS
915 MIDDLE RIVER DR., SUITE 310
1.4 CITY-ST-ZIP
FT. LAUDERDALE, FL 33305

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
SECRETARY, EXEC. V.P., D
2.3 STREET ADDRESS
915 MIDDLE RIVER DR., SUITE 310
2.4 CITY-ST-ZIP
FT. LAUDERDALE, FL 33305

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption under 607.1505, 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 provided in 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DESMOND LEVIN

6/17/96 (954) 565-9182

CR2E034 (12/95)