

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90587 001 ***150.00

DOCUMENT # P96000005689

1. Entity Name
SANCO II, INC.

Principal Place of Business

**C/O RENDINA COMPANIES
 222 LAKEVIEW AVE 17 FL
 WEST PALM BEACH FL 33401
 US**

Mailing Address

**C/O DONALD SANDS
 THE HIGHLANDS
 SEATTLE WA 98177-5002
 US**

716000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

GARDENS CORPORATE CENTER

Suite, Apt. #, etc.

3801 PGA BLVD. SUITE 555

City & State

PALM BEACH GARDENS, FL

Zip

33410

Country

USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0634056**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**COMITER, RICHARD B
 1200 CORPORATE CENTER WAY
 SUITED 100
 WELLINGTON FL 33414**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** Delete
 NAME **SANDS, DONALD A**
 STREET ADDRESS **THE HIGHLANDS**
 CITY-ST-ZIP **SEATTLE WA 98177-5002**

TITLE **D** Delete
 NAME **SANDS, MARTHA P**
 STREET ADDRESS **THE HIGHLANDS**
 CITY-ST-ZIP **SEATTLE WA 98177-5002**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
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TITLE Delete
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TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11'

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Donald A. Sands*

Donald A. Sands, President

Date **2/9/2001**

Daytime Phone # **206 362 1428**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/00)