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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600009333

SANDPIPER BEACH, INC.

Principal Plac	ce of Business	Mailing Address					
		251 SOUTHERN BLVD W PALM BEACH FL 33405					
		US			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					01/30/1996		
2. Principal Place of Business 2a. Mailing Address					4: FEI Number	Ap	plied For
26		26	•		65-0636491	No	t Applicable
		Suite, Apt. #, etc.	etc.		10	\$8.75	Additional
22		27	ā i i i		5. Certificate of Status Desired	Fee Re	equired
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	•
Zip	Country	Zip	Country	1	8. This corporation owes the current year Intan-	gible	, ,,,,,
24	25	29	30			Yes	□No
	9. Name and Address of Curren		1		10. Name and Address of New Registered Ag	ent	
		<u> </u>	81	Name			
	OBERG, MARK		82	Stroot Add	fress (P.O. Box Number is Not Acceptable)	•	
251 SOUTHERN BLVD			82	Street Add	iress (F.O. Box Number is Not Acceptable)	5 5188 T	
W PALM BEACH FL 33405			83			5 636 125	1. 特许国
			L		一	1 1 T	ingan da
			84	City	FI 1	85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered ager		<u> </u>	nt signature requir	red when reinstating) DATE		
12.	T- :	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		RS IN 12 ☐ Addition
TITLE	D	☐ DELETE	1.1 TITLE			Change	☐ Addidots
NAME	RODBERG, MARK		1.2 NAME				
STREET ADDRESS	1010 0201101111102		1.3 STREE	TADORESS			
CITY-ST-ZIP	W PALM BEACH FL 33405	3	1.4 CITY-5	ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE	ļ	· .	Change	Addition
NAME	RODBERG, WENDI R		2.2 NAME				
STREET ADDRESS	251 SOUTHERN BLVD		2.3 STREE	TADORESS			
CITY-ST-ZIP	WEST PALM BCH FL		2.4 CITY-	ST-ZIP			**
TITLE .		☐ DELETE	3.1 TITLE			Change	Addition
NAME	[m. f.]		3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS	1. 人名德德斯科勒 经基础	1. (4.8)	11. 22.
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	- 人立て (新た)(2数4数 - 数 -)。	* 30 .	
TITLE		☐ DELETE	4.1 TITLE		14 (\$) () () () () () () () () (Change.	Addition
NAME.			4. 2 NAME		•		
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4,4 CITY-5	ST-ZIP			
TITLE		□ DELETE					
NAME	1	☐ DELETE	5.1 TITLE	1		Change	Addition
		□ DECE IE	5.1 TITLE 5.2 NAME			Change	Addition
		□ DECE IE	5.2 NAME	T ADDRESS		I Change	Addition
STREET ADDRESS	1,3	□ pere⊥e	5.2 NAME			_I Change	Addition
CITY-ST-ZIP	13 220 - 1	☐ DELETE	5.2 NAME 5.3 STREE			Change	☐ Addition

14. 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 annual report or suppliemental 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 17, 1999 8:00am

Secretary of State

02-17-1999 90094 034 ***150.00