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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State ** DIVISION OF CORPORATIONS

DOCUMENT # P96000020221 (3)

SANDALFOOT MOBIL, INC.

Principal Place of Business Mailing Address 9950 SANDALFOOT BLVD. 9950 SANDALFOOT BLVD. **BOCA RATON FL 33428** BOCA RATON FL 33428-6647 3. Date Incorporated or Qualified 3a. Date of Last Report 03/05/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For -06 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 25 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AMERILAWYER CHARTERED 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 84 City 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, typical or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD TITLE DELETE 1.1 TITLE Change ___ Addition CRESCENZO, ARNIEL S NAME 1.2 NAME 9950 SANDALFOOT BLVD. STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP 1.4 CITY-ST-ZIP THILE DELETE 2.1 TITLE ☐ Change Addition CRESCENZO, KAREN NAME 2.2 NAME 9950 SANDALFOOT BLVD. STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33428** CITY-\$1-7IP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition SCERBO, JOHN NAME 3.2 NAME 9950 SANDALFOOT BLVD. STREET ADDRESS 3.3 STREET ADORESS **BOCA RATON FL 33428** CITY-ST-ZIP 3.4. CITY-ST-2IP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE THLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY - ST - ZIP

SIGNATURE:

14. I do 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 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 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 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 correction of the eceiver 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 of or an attachment with an address. 561/PTV844

FILED

Apr 01 1997 8:00am

Secretary of State