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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P96000031610 SANCTUARY MUSTE TITERNATIONAL, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

9576 E. LAKE DRIVE 9576 E. LAKE DAINE

BOCA RMON, FL 33434

BOU RITON, FL 33434

May 13, 1999 8:00 am Secretary of State

05-13-1999 90049 035 ***150.00

DO NOT WRITE IN THIS SPACE

Mola

3. Date incorporated or Qualifed

ł					1/8/96
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 PO	BUX 779	26 PO 30 X 7	179	65-0678938	Not Applicabl
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		E. G. difeate of Shatter Basisand	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23 BO	CA RATION FL	28 BARARATO	17.5	Trust Fund Contribution	Added to Fees
Zip _	Country	Zip	Country	8. This corporation owes the current	vear intangible
24 33	429 25 UCA	29 33429 3	0 11SA	Personal Property Tax.	☐ Yes ☑No
2-1	9. Name and Address of Curren		V. J77	10. Name and Address of New Reg	stered Agent
			81 Name	1 1 2 10 2	10
	Scott Gruber		<u> </u>	Anthony K. Abbate	<u>.JK</u>
, a	achi di in 1	11000	82 Street	Address (P.O. Box Number is Not Acceptable	•
· •	9576 E. LAKE DRI	VC	83	332 NE 32M STREET	
7	BOCK RATON, FL 334	341	65		
•	sood below, ic >>	′ I	84 City		85 Zip Code
	<u> </u>			BOCA RATON	FL 33431
11. Pursuant	to the provisions of Sections 607.0507	2 and 607.1508, Florida Statutes	, the above-named	corporation submits this statement for the pur pration's board of directors. I hereby accept the	pase of changing its registered
agent, I a	m familiar with, and occept the obligat	ions of, Section 607.0505, Florid	la Statutes.		is appointment as registered
SIGNATURE	facthour (Whate)	•	•		
	Signature, typed or printed hame of registered agen	and title if applicable. (NOTE: R	egistered Agent signature ri	equired when reinstating)	OATE
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	Persident	DELETE	1.1 TITLE		Change Addition
. NAME	> Cott Gruber		1.2 NAME		
STREET ADDRESS	9576 E. LAKE Dr.		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOLD PATON 5 334	34	1.4 CITY-ST-ZIP	•	,
TITLE	320A P-1029, 12 72	☐ DELETE	2.1 TITLE	PIVPIT	[V] Change ☐ Addition
NAME			2.2 NAME	Anthony Abbate	
STREET ADDRESS			2.3 STREET ADDRESS	Anthony Abbate	
				772 NE 32M 57	
CITY-ST-ZIP		□ DELETE	2.4 CITY-ST-ZIP	BOU MIND TE THIS	Change Addition
TITLE		C Defete	3.1 TITLE		□ cuanda — □ voquu
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			44 CITY-ST-ZIP		
πLE		☐ 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 Additio
NAME		صا∙ماہنا⊌ ئے	6.2 NAME		
			ĺ		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CiTY-ST-ZIP		
14. I hereby o	ertify that the information supplied with	this filing does not qualify for th	e exemption stated	in Section 119.07(3)(i), Florida Statutes. I furt	her certify that the information
officer or o	director of the corporation or the receiver	er or trustee empowered to exe	cute this report as m	iture shall have the same legal effect as if ma equired by Chapter 607, Florida Statutes; and	that my name appears in
Block 12 o	or Block 13 if changed, or on an attach	ment with an address, with all of	her like empowered	•	