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FILED
Aug 14 1998 8:00am
Secretary of State

**FILE NOW: FILING FEE AFTER MAY 1 IS $550.00**

PROFIT CORPORATION ANNUAL REPORT

1998 JC 1998

FLORIDA DEPARTMENT OF STATE
**Sandra B. Mortham**
Secretary of State
DIVISION OF CORPORATIONS

~~Secretary of State~~

[redacted]

DOCUMENT # **P96000044595 (2)**

1. Corporation Name
**NO SAND TANNING INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 6342 FOREST HILL BLVD #333<br>WEST PALM BEACH FL 33415 | 6342 FOREST HILL BLVD #333<br>WEST PALM BEACH FL 33415-6104 |

| | |
|---|---|
| 2. Principal Place of Business<br>21 5281 Lake Ave | 2a. Mailing Address<br>26 521 Lake Ave |
| Suite, Apt. #, etc.<br>22 9 | Suite, Apt. #, etc.<br>27 9 |
| City & State<br>23 Lake Worth, FL | City & State<br>28 Lake Worth, FL |
| Zip / Country<br>24 33460 / 25 US | Zip / Country<br>29 33460 / 30 US |

| | |
|---|---|
| 3. Date Incorporated or Qualified<br>05/24/1996 | 3a. Date of Last Report<br>3/17/97 |
| 4. FEI Number<br>65-0672925 | [redacted] Applied For / Not Applicable |
| 5. Certificate of Status Desired | ☒ No — $8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution | ☐ — $5.00 May Be Added to Fees |
| 9. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | ☐ Yes ☒ No |

**8. Name and Address of Current Registered Agent**

Jeffrey Cordings
521 Lake Ave Suite 9
Lake Worth, FL 33460

**10. Name and Address of New Registered Agent**

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City FL 85 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] DATE

Signature of new registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | ☒ DELETE | 13.1 TITLE | ☐ Change ☒ Addition |
| NAME | | 13.2 NAME | |
| STREET ADDRESS | | 13.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 13.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 23.1 TITLE | ☒ Change ☐ Addition |
| NAME | | 23.2 NAME | Jeffrey Cordings |
| STREET ADDRESS | | 23.3 STREET ADDRESS | 13948 Folkstone Circle A |
| CITY-ST-ZIP | | 23.4 CITY-ST-ZIP | Wellington, FL 33414 |
| TITLE | ☐ DELETE | 33.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 33.2 NAME | |
| STREET ADDRESS | | 33.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 33.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 43.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 43.2 NAME | |
| STREET ADDRESS | | 43.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 43.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 53.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 53.2 NAME | |
| STREET ADDRESS | | 53.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 53.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 63.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 63.2 NAME | |
| STREET ADDRESS | | 63.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 63.4 CITY-ST-ZIP | |

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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 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 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.

**SIGNATURE:** [signature] 8/4/98 7/27/98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0907149