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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham *

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # P96000045552 (2)

SAND PINE VENTURES, INC.

FILED Apr 07 1997 8:00am Secretary of State



Principal Place of Business 653 SAND PINE LN. DEERFIELD BEACH FL 33442 2. Principal Place of Business		Mailing Address 653 SAND PINE LN. DEERFIELD BEACH FL 33442-1301		3. Date Incorporated or Qualified O5/29/1996 3a. Date of Last Report	
21 220 C • Suite, Apt #, etc	ngress Park Vi	2a. Mailing Address 26 Suite, Apt. #, etc.		4. FEI Number 6. Certificate of Status Desire	— \$R 75 Additional
City & State	230 Beach F	27 City & State 28		Election Campaign Financi Trust Fund Contribution	Fee Required
Zip 24 33445	Country 25 M same and Address of Curre	Zip 29	Country 30	· · · · · · · · · · · · · · · · · · ·	y for intangible tax under s. 199.032, Yes No
	6TH ST. RDALE FL 33311		83 84 City	dress (P.O. Box Number is Not Ace	PL 85 Zip Code
SIGNATURE Signature.	yped or printed name of registered ag	ent and trie if applicable (NO	iles: Tie above-rame is so authorized by (13 korpen londa Statutes) TE: Registered Agent signature requ	trogration stemits this statement for attions board of directors. I hereby a uirad tren reinstation)	the purpose of changing its registered accept the appointment as registered
STREET ADDRESS 653	IAN, RICHARD A SAND PINE LN. IFIELD BEACH FL 33442	ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS IN 12 Change Addition
STREET ADDRESS 853	IAN, THERESA A SAND PINE LN. FIELD BEACH FL 33442	L] DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET AUDRESS CITY-ST-ZIF		DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STHEEF ADDRESS CITY: ST-7P		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME		DELETE	51 TITLE 52 NAME 53 STREET ADDRESS		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP			5.4 CITY-ST-ZIP		

receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an attachment with an address. I am an officer or director of appears in Block 12 or Block

SIGNATURE: