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 # P96000049997

1. Corporation Name

SODIUM FREE, INC.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90053 039 ***150.00



	•								
Principal Place	of Business	Ma	ailing Address				- - 1 (63)(1801 (10 10)(4 0)(6) 006)(1 00)(1 80)(7 69)(1		8 18411 1481 1881
2641 NW 98TH TERRACE 2641 NW 98TH TERRACE			•						
CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065									
							DO NOT WRITE IN THIS SPACE		
							3, Date Incorporated or Qualifed		1
		1	Maritim - Aulahana				06/10/1996 4. FEI Number		pplied For
	ace of Business	2a. 26	Mailing Address				65-0676335		ot Applicable
21 Suite Ant # etc			Suite, Apt. #, etc.						Additional
Suite, Apt. #, etc.			T				5. Certificate of Status Desired		equired
City & State			City & State				6. Election Campaign Financing	\$5.00	May Be
23			28				Trust Fund Contribution Added to Fees		
Zip	Country	201	Zip	Countr	у		8. This corporation owes the current year In	ntangible	
24	25	29	3	0			Personal Property Tax.	Yes	□No
<u> </u>	9. Name and Address of Curre		tered Agent				10. Name and Address of New Registered	Agent	
					l Nar	ne			
CHIN-SANG, DEBORAH				83	Stre	eet Address (P.O. Box Number is Not Acceptable)			
2641 NW 98TH TERRACE				"	Street Address (1.0. box Hambar to Not Not public)				
CORAL SPRINGS FL 33065				8:	3				i
ĺ				84	4 City	;		85 Zip	Code
				- 1	1		Fl	<u> </u>	
11. Pursuant	to the provisions of Sections 607.05	02 and 6	07.1508, Florida Statutes	, the abo	ve-nam	ed corpo	ration submits this statement for the purpose of	f changing its	s registered
office or re	egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florio ations of	ia. Such change was aut , Section 607.0505, Floric	norized b la Statute	y the co \$.	orporation	n's board of directors. I hereby accept the appo	miniment as it	zgisiered
SIGNATURE									
	Signature, typed or printed name of registered ag	ent and title	if applicable. (NOTE: R	egistered Ag	ent signat	ure required	when reinstating) DATE		
12.	OFFICERS A	ND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D		☐ DELETE	1.1 TITLE			•	Change	☐ Addition
NAME	CHIN-SANG, DEBORAH			1.2 NAME					
STREET ADDRESS	2641 NW 98 TERR			1.3 STRE	ET ADDRE	SS			
CITY-ST-ZIP	CORAL SPRINGS FL			1.4 CITY-		_		Change	Addition
TITLE	" - 1		1	2.1 TITLE			☐ Change	Addition	
NAME	Crist Grata Billian		2.2 NAME						
STREET ADDRESS	2641 N W 95TH TER		, .	2.3 STRE		SS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065			2. 4 CITY			····	Change	☐ Addition
mle			☐ DELETE	3.1 TITLE		•			
NAME				3.2 NAME					
STREET ADORESS				3.3 STRE		:58			
CITY-ST-ZIP			☐ DELETE	3.4. CITY				Change	Addition
TITLE				4,1 TITLE				onenge	
NAME				4. 2 NAMI		-00	•		
STREET ADDRESS				4.3 STRE		:88			
CITY-ST-ZIP			[] DELETE	4.4 CITY- 5.1 TITLE			47	☐ Change	Addition
TITLE	•		L.J DELETE	5.1 IIILE 5.2 NAME		1		_ 5,14,190	
NAME				5.3 STRE		ss			
STREET ADDRESS	•			5.4 CITY-		_			
CITY-ST-ZIP			☐ DELETE	6.1 TITLE				☐ Change	Addition
TITLE				6.2 NAME		1		L., 51101190	
NAME				6.3 STRE		SS			
STREET ADDRESS				6.4 CITY-		~			
CITY-ST-ZIP				0.4 CHY-					

CITY-ST-ZIP 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 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, with all other like empowered.

SIGNATURE: