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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000058798 (5)

SUNDANCE INTERNATIONAL, INC.

Principal Place of Business Mailing Address						i 1801/00) ist 1616 Birli Bolit Matt Batt Batt batt Brit Butt Geare saret tour				
3400 S TAMIAM SARASOTA FL			3400 S TAMIAMI TRAIL #303 Sarasota fl 34239-8023							
						3. Date Incorporated or Qualified 07/12/1996	Sa. D	ate of Last R	eport	
2. Principa! Pl	ace of Business	2a. Mailing Address				4. FEI Number		}	plied For	
21		26				65-0681682			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Fee Re	quired	
City & State 23	3	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added		
Z _I p Country 25		Zip Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re	gistered	Agent		
JAEN	NSCH, PETER J			81	Name					
3400 S TAMIAMI TRAIL #303 SARASOTA FL 34239				82	Street Ac	Address (P.O. Box Number is Not Acceptable)				
OMIN	MOUIN FL 04200	·		83						
				84	City	<u> </u>	FL	85 Zip	Code	
SIGNATURE	m familiar with, and accept the obli- Signature Typed or printed name of registered a	igent and this if applicable (N	OTE. Registere			quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIRECTOR	00 IN 40	
12.		ND DIRECTORS DELETE	13. 1,1 Ti	TI E		ADDITIONS/CHANGES TO OFFIC	ERS ANI	K Change	Addition	
TITLE NAME	D Bogner, Rainer	Lad Otter	1.2 N					- Change		
STREET ADDRESS	3400 S TAMIAMI TRAIL #303	1			ADDRESS	19070 Evergreen Ro	he.			
CITY-ST-7IP	SARASOTA FL 34239				T-ZIP	Fort Myers, FL 339				
TOLE	0,10,00	☐ DELETE	2.1 1				∠.≛ ,I	Change	Addition	
NAME			2.2 N	AME						
STREET ADDRESS			2.3 S	TREET	ADDRESS					
CITY-S1-ZIP					ST - ZIP			0	4.4300	
THILE		DELETE	3.1 1					☐ Change	Addition	
NAME			32 N		**********					
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP TITLE		☐ DELETE	4.1 7		ST-ZIP			Change	Addition	
NAME				AME	1					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP					ST-ZIP					
TITLE		DELETE.	5.1 T	ITLE				Change	Addition	
NAME			5.2 N	AME						
STREET ADDRESS			5.3 S	TREET	ADDRESS					
CITY-ST-ZIP					ST-ZIP	· · · · · · · · · · · · · · · · · · ·		Llos	T aune	
TITLE		☐ DELETE	6.1 T	ITLE				Change	Addition Addition	

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

2-3-1997

941-366-9841

FILED

Feb 12 1997 8:00am

Secretary of State

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