## 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

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90159 047 \*\*\*150.00

DOCUMENT	#.	P96000099305
1 Compention Name		

SANDSTONE INTERNATIONAL MARKETING, INC.					
Principal Place of Business	Mailing Address				
4675 S.W. 74TH STREET MIAMI FL 33143	4675 S.W. 74TH STREET MIAMI FL 33143	<del>-</del> ·	DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualifed 12/05/1996		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 65-0710461		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired   S8.		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution		
Zip Country	Zip 29 30	Country	8. This corporation owes the current year Intangible Personal Property Tax.		
	f Current Registered Agent		10. Name and Address of New Registered Agent		
FARR, VERONICA 4675 S.W. 74TH STREET MIAMI FL 33143			ddress (P.O. Box Number is Not Acceptable)		
MIMINI FC 33143		83   84   City	F. 85		

DO	NOT	WRITE	IN THIS	SPACE

Applied For

□No

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

Not Applicable \$8.75 Additional

MAIN	AI FL 33143	83	<del>                                     </del>			
1711/711		83				
		84	City	FL	85 Zip	Code
<del></del>			L	<del></del>		to registered
office or r	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the egistered agent, or both, in the State of Florida. Such change was authorn familiar with, and accept the obligations of, Section 607.0505, Florida	rized by	the come	corporation submits this statement for the purpose of bration's board of directors. I hereby accept the appoin	changing i ntment as i	egistered
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent and title if applicable.	stered Ager	t signature r	equired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	
TITLE	D DELETE	1,1 TITLE		0	Change	Addition
NAME	POTAMKIN, ROBERT	1.2 NAME		Veronica Farr		
STREET ADDRESS	4675 S.W. 74TH STREET	1.3 STREET	ADDRESS	4675 SW 74thST	*	
CITY-ST-ZIP	MIAMI FL 33143	1.4 CITY+ST-ZIP		Miami, FL 33143		
TITLE	D . DELETE	2.1 TITLE			Change	Addition
NAME	POTAMKIN, ALAN H	2.2 NAME				
STREET ADDRESS	4675 S.W. 74TH STREET	2.3 STREET	ADDRESS			1
CITY-ST-ZIP		2. 4 CITY-5	T-ZIP			
TITLE	DELETE	3.1 TITLE		,	Change	Addition
NAME	`* .	3.2 NAME				
STREET ADDRESS	•	3.3 STREE	TADDRESS			
CITY-ST-ZIP		3.4. CITY+S	IT-ZIP		·	
TITLE .	- DELETE	4.1 TITLE			Change	Addition
NAME		4. 2 NAME				
STREET ADDRESS	18 15	4.3 STREET	ADDRESS		•	1
CITY-ST-ZIP	`	4.4 CITY- S	T-ZIP		<u></u>	7.410
TITLE -		5.1 TITLE			Change	Addition
NAME	·				=== <u>.</u> 2 =	
STREET ADDRESS			TADDRESS			}
CITY-ST-ZIP		5.4 CITY-S	T-ZiP			Addition
TITLE	ا عليا حديد ا	6.1 TITLE			☐ Change	Hadision
NAME	* * * * * * * * * * * * * * * * * * *	6.2 NAME				}
STREET ADDRESS	•		radoress 			
CITY-ST-ZIP	ertify that the information supplied with this filling does not qualify for the	6.4 CITY-S		Lin Section 119 07/3Vi) Florida Statutes I further cert	lify that the	information
14. I hereby o	eriny that the information supplied with this filling does not qualify for the	exempt	ion stated	in Section 119.07(3)(i), Florida Statutes. I futilier cent		

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:

Alan H GPotamking R

4-16-99

305-665-9600