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

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000015575 (8) DOCUMENT

SANDDOLLAR MARKETING GROUP, INC.

C/O JAMES R. BEACH 21267 HAZELWOOD LANE **BOCA RATON FL 33428**

Principal Place of Business

Mailing Address

FILED Jan 16 1998 8:00am Secretary of State



C/O JAMES R. BEACH 21267 HAZELWOOD LANE DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33428** 3. Date incorporated or Qualified 02/14/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0140035 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State Cily & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible Yos 24 25 29 U-No 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BEACH, JAMES R 21267 HAZELWOOD LANE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33428** 83 R4 City 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 Lorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lan familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOT) : Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DOLLFTE TITLE 1.1 1111.0 Change Addition JAMES R. BEACH 21267 Hazelwood Lane Baa Raton, FL 33428 NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change 21 TITLE Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 City - St - ZiP TITLE DELETE Change 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-SI-ZIP 3.4 CITY-ST-ZIP DELFTE Change THILE 4.1701.8 Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - St - ZiP DELETE TITLE Change Addition 5.1 DILE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TATLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CHY-SI-70P 6.4 CITY- \$1-2IP

14. I horeby 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.