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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNU	JAL REPORT		Sandra B. Morth Secretary of Stat DIVISION OF CORPOR			IS	Secretary of State
1. Corporation	MENT # P970 NDING, INC.	000426	516 (7)			160	1 1800/201 118 180// 180// 201// 880// 880// 880// 880// 880/ 180/8 AUST J/ELS AUST
Principal Place	o of Rusinoss	Mailing A	Hdrace				
'	RSITY DRIVE		iniversity drive				
SUITE 511 SUITE 511							DO NOT WRITE IN THIS SPACE
CORAL SPR	INGS FL 33065	CORAL	. Springs fl 330	065			3. Date Incorporated or Qualified
							05/09/1997
2. Principal Pl	2. Principal Place of Business 2a. Mailing Address						4, FEI Number Applied For
21		26					(45-675-8210 Not Applicable
Suite, Apt.		27 Suite	Apt #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Regulred
City & State)	City 8	State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip		Coun	try		8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Cur	29 29 Peopletered 4		30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
D.	ARKER, JOE				B1	Name	IC. Italia and Addison String Indiana.
	300 UNIVERSITY DRIVE				32 5	Ctroot Ada	dress (P.O. Box Number is Not Acceptable)
SUITE 511					`	Street Auc	areas (F.O. Box Number is Not Acceptable)
	ORAL SPRINGS FL 33065			₹	33		
				- -	34 (City	85 Zip Code
		·					FL
office or re	o the provisions of Sections 607.0 agistered agent, or both, in the St a familiar with, and accept the of	ate of Florida, Suc	h change was au	uthorized	by th	named cor ne corpora	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE .							
12.	Signature, typed or printed name of registered OFFICERS	AND DIRECTORS	ble (NOTE	Registered /	Agent e	signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	AND OTHER OTHER	DELETE	1.1 TITL	E .	~	Change Addition
NAME	PARKER, JOE			1.2 NAM			
STREET ADDRESS	3300 UNIVERSITY DR. #	511		1.3 STR		DRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33065				/-ST-2	i	
TOTLE	D		DELETE	2.1 T(TL)			☐ Change ☐ Addition
NAME	FERNANDEZ, PETE			2.2 NAM	AE		
SYREET ADDRESS	1035 N.E. 125TH ST., #3	301		2.3 STRE	EET AD	DRESS	
CITY-ST-ZIP	NORTH MIAMI FL 33161			2. 4 CIT	Y - ST -	ZIP	
TITLE			DELETE	3 1 TITE	F		☐ Change ☐ Addition
NAME				3.2 NAW			
STREET ADDRÉSS	e e			9.3 STRE		i	
CITY-ST-ZIP			DELETE	3.4. CITY		ZIP	Change Addition
TITLE			i nerett	4.1 TITE			Change Addition
NAME OVEREZ ADODESC				4. 2 NAA		oproe	
STREET ADDRESS				4.3 STRE			
CITY-ST-ZIP TITLE			DELETE	5.1 TITLE		ir -	Change Addition
NAME			Sand Control	5.2 NAM		Ì	- Specific
STREET ADDRESS				5.3 STRE		DRESS	
CITY-\$1-ZIP				5.4 CITY		1	
TITLE			DELETE	61 7(7)			Change Addition

14. Thereby certify that the information supplied with this filing closes indicated on this annual report or supplemental annual report is to officer or director of the corporation or the officer or director of the corporation and attachment with an additional content of the corporation and content of the corporation attachment with an additional content of the corporation attachment of the corporation attac qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information land executate and that my signature shall have the same legal effect as if made under oath; that I am an execution execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

03-62-98

FILED

Mar 09 1998 8:00am

954-345-4/11