

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

007912

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JUN 28 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # **P97000068575 (4)**

1. Corporation Name

SARA OF BONITA, INC.

Principal Place of Business

**3421 BONTIA BEACH ROAD
#408
BONITA SPRINGS FL 34134**

Mailing Address

**3421 BONTIA BEACH ROAD
#408
BONITA SPRINGS FL 34134**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/05/1997

4. FEI Number

593403054

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 3431 BONITA BEACH RD

Suite, Apt. #, etc.

22 #207

City & State

23 BONITA SPRINGS, FL

Zip

24 34134

Country

25 USA

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

29

30

9. Name and Address of Current Registered Agent

TAYLOR, SARA J

**3431 BONITA
BEACH RD
#207
BONITA SPRINGS FL 34134**

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE

Signature typed and printed name of registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **TAYLOR, SARA J**

STREET ADDRESS **3431 BONITA BEACH RD. #408**

CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE ☐ DELETE

NAME **TAYLOR, SARA J**

STREET ADDRESS **3431 BONITA BEACH RD**

CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE ☐ DELETE

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TITLE ☐ DELETE

NAME **TAYLOR, SARA J**

STREET ADDRESS **3431 BONITA BEACH RD**

CITY-ST-ZIP **BONITA SPRINGS FL 34134**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

CR2E034 (5/98)

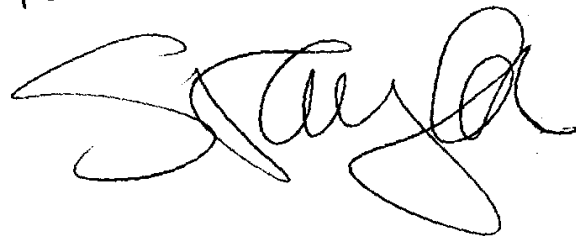
7/13/98

pg 2

TO WHOM IT MAY CONCERN:

I HAVE JUST NOW
RECEIVED MY 2ND NOTICE FOR
THE 1998 CORPORATION FEE.
THE ADDRESS IS WRONG! I'VE
ENCLOSED A COPY OF MY ORIGINAL
CORPORATION FILING WITH THE
CORRECT ADDRESS → PLEASE
CORRECT YOUR FILES SO I
RECEIVE MY MAIL ON TIME.

THANK YOU

A stylized, handwritten signature in black ink, appearing to read "Stanley". The signature is fluid and cursive, with a large loop at the end.

PRESIDENT