

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90468 017 ***150.00

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DOCUMENT # P98000069042

1. Entity Name
SIDNAL, INC.



Principal Place of Business
**4175 EAST BAY DR
STE 246
CLEARWATER FL 33764**

Mailing Address
**P O BOX 20007
SAINT PETERSBURG FL 33702-0007**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3527364**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LANDIS, ROBERT R
1144 SERPENTINE DR. SOUTH
ST. PETERSBURG FL 33705-6120**

Name **ROBERT R. LANDIS**

Street Address (P.O. Box Number is Not Acceptable)

4175 EAST BAY DRIVE # 246

City **CLEARWATER**

FL

Zip Code **33764**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP ST** ☐ Delete
NAME **LANDIS, ROBERT R**
STREET ADDRESS **1144 SERPENTINE DR. SOUTH**
CITY-ST-ZIP **ST. PETERSBURG FL 33705-6120**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **ST** ☒ Delete
NAME **LANDIS, PEGGY I**
STREET ADDRESS **1144 SERPENTINE DR. SOUTH**
CITY-ST-ZIP **ST. PETERSBURG FL 33705-6120**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **Robert R. Landis, PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 7, 2003

Date

927-6309705

Daytime Phone #

CR2E034 (10/02)