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2002 Uniform Business Report (UBR)

SIGNATURE:

| 2002 Uniform Business Report (UBR) | | | | | | | FILED Apr 17, 2002 8:00 am | | | | |
|---|---------------------------------|--|--|---------------------|--|---|---|-------------------------|------------------------------|-------------|--|
| DOCUMENT # P98000080195 1. Entity Name SANDRA ELLIS, INC. | | | | | | | Apr 17, 2002 8:00 am Secretary of State 04-17-2002 90133 039 ***150.00 | | | | |
| Principal Plac 510 OAKRIDG DAYTONA BE US | SE BLVD | 1 | Mailing Address 510 OAKRIDGE BLVD DAYTONA BEACH FL 32118-3973 US | | | | B0067712 | | | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | | 3. Mailing Address Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | | |
| City & State | | | City & State | | | 4. 1 | 4. FEI Number 59-3534620 Applied For | | | | |
| Zip | o Country | | Zip Coun | | ntry | 5. (| Certificate of Status Desired | | 8.75 Add | | |
| 6. Name and Address of Current Registered Agent | | | | | 7. Name and Address of New Registered Agent | | | | | | |
| ELLIS, SANDRA A | | | | | Name | | | | | | |
| 510 OAKRIDĠE BLVD | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| DAYTONA BEACH FL 32118-3973 | | | | | | | | | | | |
| | | | | | City | FL Zip Code | | | | | |
| 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. | | | | | | | | | | | |
| | | | | | | | | | | | |
| SIGNATURE | Signature, typed | or printed name of registered agent an | d title it applicable. (NOTE | : Registere | ed Agent signatu | re required when re | instating) | DATE | | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) | | | FILE NOW! After May 1, 200 Make Check Payab | will be \$5 | 50.00 | Election Campaign Finand Trust Fund Contribution. | cing | \$5.0 6 Added | 0 May Be I to Fees | | |
| 11. | | OFFICERS AND D | IRECTORS | 12. | | AD | DITIONS/CHANGES TO OFFICE | RS AND E | DIRECTORS | 3 IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | NDRA A NDGE BLVD BEACH FL 32118-3973 | □ Delete | " | í | | | (| □ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | □ Delete | " | í | | | [| ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | - II | 1 | | | (| Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 1. | | ☐ Delete | - 11 | ľ | | | [| Change | Addition | |
| TITLE NAME STREET ADDRESS | · · · · · · · · | | Delete | TITL NAM STRE | E Me EET ADDRESS | | | [| Change | Addition | |
| TITLE NAME STREET ADDRESS | | | ☐ Delete | TITL NAM STRE | ME EET ADDRESS | | |] | Change | ☐ Addition | |
| indicated of the cor | on this repor poration or th | t or supplemental report is t e receiver or trustee empov | rue and accurate and that m | the exe ny signa | ature shall ha | ave the same I | 119.07(3)(i), Florida Statutes. I fu egal effect as if made under oat da Statutes; and that my name a | n; that I am | an officer | or director | |