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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000092003

1. Corporation Name

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90015 048 ***150.00

SANDRIK	(ENTERPRISES, INC.					1 FREHERE NO 1819: NEW SENS CON) 	 	3(66 (2)) 2 66)
Principal Place	e of Business	Mailing Address				t idditadi iin teibi tatti daili deit	i Anii: Anii: Anii	HW 11817 PRIJI W	8188 3161 1 88 1
541 LONG LAKE DRIVE 541 LONG LAKE DRIVE									
PENSACOLA FL 32506 PENSACOLA FL 32506						DO NOT WOL	E IN THIS S	יחאכר	
						3. Date Incorporated or Qualifed	E IN THIS S	PACE	
					ļ	10/28/1998			İ
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Apr	olied For
	PaceTRACK Rd. NW	26				59-3541227			Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_	7		\$8.75 A	dditional
22		27				5. Certificate of Status Desired		Fee Red	quired
City & State	e	City & State				6. Election Campaign Financing		\$5.00	
23 FT-WAL	TON BCH, FL	28				Trust Fund Contribution		Added to	Fees
Zip	Country	Zip Country			8. This corporation owes the current year Intangible Personal Property Tax. Yes You				
24 3254		29 30)			Personal Property Tax. 10. Name and Address of New Re			MNO
	9. Name and Address of Current	Registered Agent	8	1 Name		10. Name and Address of New K	egistered A	Agur	
PITKIN, SANDRA									
₄ 541 i		82 Street Addre			s (P.O. Box Number is Not Acceptal	ole)			
PENSACOLA FL 32506			83	3		,,,			
-	* · · · · · · · · · · · · · · · · · · ·					*1 * / .		last st. s	
*			84	City	3		∵FĽ	85 Zip C	ode
11. Duravest to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above named cornoration submits this statement for the number 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 or printed name of registered agent			ent signature re	equired w	hen reinstating)	DATE AND	DIDECTO	DC IN 12
12.	OFFICERS ANI	D DIRECTORS DELETE	13.		P	ADDITIONS/CHANGES TO OFF		☐ Change	Addition
TITLE		C DECE IE	1.2 NAME		SAL	UDRA C. PITEIN.		i ondinge	E1.404.00
NAME				ET ADDRESS	54	I LONG LAKE DR	ŕ	•	
STREET ADDRESS			1.4 CITY-	- 1	_	SACOLA, FL 32504			
CITY-ST-ZIP TITLE			2.1 TITLE		V			☐ Change	Addition
NAME			2.2 NAME		RIC	HARD C PITKIN			
STREET ADDRESS				ET ADDRESS	54	I LONG LAKE DR			
CITY-ST-ZIP			2. 4 CITY-	- 1	PER	USACOCA , FL 32504			
TITLE	☐ OELETE		3.1 TITLE					☐ Change	☐ Addition
NAME			3.2 NAME	.					
STREET ADDRESS		'	3.3 STRE	ET ADDRESS					Ì
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			•		
TITLE		, DELETE	4.1 TITLE					☐ Change	☐ Addition
NAME	·		4. 2 NAME	·					
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C/TY-ST-ZIP	The spirit of the second		4.4 CITY					□ Ch	· D Addition
TITLE		DELETE	5.1 TITLE					Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS				ET ADORESS				•	
CITY-ST-ZIP		☐ DELETE	5.4 CITY- 6.1 TITLE	•	• ** 7		1	Change	Addition
TITLE			6.2 NAME	- 1		- 1 4	;	ري ال	
NAME				ET ADDRESS			•		ļ
STREET ADDRESS	1		5.5 G II (L)			,			

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, with all other like empowered.

SIGNATURE: