## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED DOCUMENT # **P99000024797** May 16, 2000 8:00 am Secretary of State SAND STAR ENTERPRISES, INC. 05-16-2000 90012 026 \*\*\*150.00 Mailing Address Principal Place of Business 1121 ALGOMA ST. 1121 ALGOMA ST. **DELTONA FL 32725-8305** DELTONA FL 32725 3. Mailing Address 2. Principal Place of Business 10B0X 4035 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number 3581026 Applied For City & State City & State FL. enterdrise Not Applicable Country VOLUS 1A \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHOENWEISS, RICHARD Street Address (P.O. Box Number is Not Acceptable) 1121 ALGOMA ST. **DELTONA FL 32725** City Zip Code d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above na <u> CHORUWEIST</u> SIGNATURE of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PRESIDENT ☐ Addition Change Change TITLE ☐ Delete TITLE JOHNN SCHOENMEISS NAME SCHOENWEISS, RICHARD NAME 1121 ALGOMA ST. STREET ADDRESS STREET ADDRESS 1121 ALGOMA ST. CITY-ST-ZIP DELTONA , FL 32725 CITY-ST-7IP DELTONA FL 32725 VICE PRESIDENT Change ☐ Addition ☐ Delete TITLE TITLE NAME TAMI Hughes NAME SCHOENWEISS, JOANN 1121 ALGOMA ST. STREET ADDRESS STREET ADDRESS 1121 ALGOMA ST. CITY-ST-ZIP DEMONA CITY-ST-7IP , FL 32925 **DELTONA FL 32725** Sec / TRes Change ☐ Addition TITLE ☐ Delete ENWRIGHTTLORI NAME SCHOENWEISS: TRAVIS W 1121 ALGOMÁ SF. STREET ADDRESS STREET ADDRESS 1121 ALGOMA ST. CITY-ST-ZIP DELTUNA, FL 32725 CITY-ST-ZIP **DELTONA FL 32725** Change Addition FRA DIRECTOR TITLE ☐ Delete TITLE Schoenweiss, Richard **ENWRIGHT, LORI** NAME NAME 1121 ALGOMA ST. STREET ADDRESS STREET ADDRESS 1121 ALGOMA ST. CITY-ST-ZIP CITY-ST-ZIP DOITONA FL. 32725 **DELTONA FL 32725** DIRECTOR Change Addition SD ☐ Delete TITLE SCHOENWEST, TRAVIS NAME NAME HUGHES, TAMI 1121 ALGOMA ST. STREET ADDRESS STREET ADDRESS 1121 ALGOMA ST. CITY-ST-ZIP CITY-ST-ZIP DCITONA, FL 32725 **DELTONA FL 32725** Change Addition. ☐ Delete TITLE TIT) F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 of flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

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