

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 05, 2001 8:00 am
Secretary of State

07-05-2001 90004 004 ***558.75

DOCUMENT # *P 990000 98544*

1. Entity Name
Sandy's DREAM, inc.

Principal Place of Business *1501 LAKE AVENUE SE*
LARGO FL 33771

Mailing Address *1501 LAKE AVENUE SE*
LARGO FL 33771

A0075797

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number *59-3607443*

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

6. Name and Address of Current Registered Agent

Stall, RJ
602 South Blvd
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name

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

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 *NO CHANGE*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

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

11. OFFICERS AND DIRECTORS

TITLE	<i>DIRECTOR</i>	☐ Delete
NAME	<i>DAMICO, RON</i>	
STREET ADDRESS	<i>1501 LAKE AVENUE SE</i>	
CITY-ST-ZIP	<i>LARGO FL</i>	
TITLE	<i>DAMICO, RICARDO</i>	☒ Delete
NAME	<i>1501 LAKE AVENUE SE</i>	
STREET ADDRESS	<i>LARGO, FL 33771</i>	
CITY-ST-ZIP		
TITLE	<i>HUGHES, MIKE</i>	☒ Delete
NAME	<i>1501 LAKE AVENUE SE</i>	
STREET ADDRESS	<i>LARGO FL 33771</i>	
CITY-ST-ZIP		
TITLE	<i>Rich PAUL</i>	☒ Delete
NAME	<i>1501 LAKE AVENUE SE</i>	
STREET ADDRESS	<i>LARGO FL 33771</i>	
CITY-ST-ZIP		
TITLE	<i>ARSENAULT, Sheila</i>	☒ Delete
NAME	<i>1501 LAKE AVENUE SE</i>	
STREET ADDRESS	<i>LARGO FL 33771</i>	
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 or trustee 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.

SIGNATURE: *RON DAMICO* *Paul Duro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date *6-28-2001* Daytime Phone # *727-584-2499*

CR2E034 (11/00)