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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # S62397

1. Corporation Name

(2)

SAND LAKE APARTMENTS, INC.								
Principa! Place o	f Business	Mailing Address			A LEGISTRA COM MINISTER APPLIA CONTRACTOR SERVING CONTRACTOR CONTR	14 SI GIBII 6161	1 #1911 B1811 1	#191 #191 199
501 KRUG STREET SUITE 201 KITCHENER. ONTARIO CANADA N2B3V US		501 KRUG STREET P.O. BOX 23023 KITCHENER, ONTARIO CANADA N283V US		3. Date Incorporated or Qualified 06/26/1991	3a. Date of Last Report 04/20/1995			
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Namber	1 <u></u> -		polied For
21		26			65-0277481			ot Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		• • • • • • • • • • • • • • • • • • • •	5. Certificate of Status Desired	12		Additional equired
22		27			6. Election Campaign Financing			May Be
City & State		Gity & State			Trust Fund Contribution		,	to Fees
Z _I p	Country	Zip	Country		8. This conporation has liability for in	ntangible tax		
24	25	29	30		Florida Statutes 🔲 Yes	[DNo		
	9. Name and Address of Currer	L			10. Name and Address of New R	egistered A	gent	
			81					
PRATESI, EMIL G			B2 Street Add		ress (P.O. Box Number is Not Acceptab	e)		
	ARK STREET		83					
CLEARW	VATER FL 34616						TEETE	0
			84	City		FL	85 Zip	Code
	n, and accept the obligations of, Soc	nor oor, coos, Honda Statute						
	Signal are typed or printed name of registered agen	TOTAL TRUST OF THE STATE OF THE	iO in Registered Apr	er'skjira' toe respiro	பு அவர்கள்ளு ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	RS IN 12
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, Furnier certify that the information indicated on this annual report or suppliernental 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 trusted 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Febru, 1996

519-578-7771

Daytone Priorie #