Applied For

\$8.75 Additional

Fee Required

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90133 030 \*\*\*150.00

|--|--|--|--|--|--|

DOCUMENT # V04442

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

SAND CREEK CORP.

Mailing Address

6517 NW 78TH PLACE PARKLAND FL 33067

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6517 NW 78TH PLACE PARKLAND FL 33067

2a. Mailing Address

Suite, Apt. #, etc.

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27

DO NOT WRITE IN THIS SPACE
3. Date incorporated or Qualified

01/07/1992

98-0122000

5. Certifcate of Status Desired

4. FEI Number

City & State City & State					6. Election Ca		ing 🗇	\$5.00				
23						Trust Fund	Contribution		Added to	Fees		
Zip	Country	Country Zip C		intry	ntry 8. This corporation owes the		current year Int		_			
24	25 29 30		30	Personal Property Tax.				<u> </u>	□No			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent												
				81 Na	ime H	ERBERT	HIR	SchBERG	3			
	EL, MORRIS			82 St			nber is Not Ace					
4320 N. CASPER COURT				-	7	ss (P.O. Box Nun	RIDAN J	Theet	SUITE	د		
HOLLYWOOD FL 33021				83	47	700 She	MAD in	street	Suite	S		
·				84 Ci	ty // .			FI	85 Zip C			
Hollywas0   FL     3307/												
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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												
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 State Section 607,0505, Fl												
SIGNATURE	HERBERT HIRSCHBE	88 /N						3/8	199	\		
o o o o o o o o o o o o o o o o o o o	Signature, typed or printed name of registered agent a		(NOTE: Registered	1 Agent sign:	ature required v		- -	DATE	·			
12.	OFFICERS AND		13.			ADDITIONS/	CHANGES TO	OFFICERS AN	D DIRECTOI Change	RS IN 12		
TITLE	DP	DETE.							☐ Criange			
NAME	SCHNEIDER, GERALD		1.2 N									
STREET ADDRESS 6517 NW 78TH PLACE			1.3 S	TREET ADDI	RESS							
CITY-ST-ZIP	PARKLAND FL 33067			TY-ST-ZIP						Addition		
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CITY-ST-ZIP			6.4 0	ITY-ST-ZIP			_					

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 alachment with an address, with all other like empowered.

SIGNATURE:

WATCHELL SIGNATURE AND TYPED OR PRINTED PARTY OF PRODE # DOUBLE OF PRINTED PARTY OF PRODE #

CR2F034 (11/98)