

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 359293**

1. Entity Name  
**SAN-TEK ENTERPRISES, INC.**



Principal Place of Business  
**1338 S KILLIAN DR  
LAKE PARK, FL 33403**

Mailing Address  
**1338 S KILLIAN DR  
LAKE PARK, FL 33403**



03242004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1286786**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**RUFFOLO, HENRY  
315 3RD ST  
WEST PALM BEACH, FL 33407**

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

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

UC0000098135  
03/29/04-80028-018 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SANVILLE, ALAN D 10170 DAHLIA AVE PALM BEACH GNDS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS SANVILLE, DOROTHY L 10170 DAHLIA AVE. PALM BEACH GNDS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SANVILLE, DORTHY L. 10170 DAHLIA AVE. PALM BEACH GNDS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Dorothy L. Sanville - Dorothy L. Sanville 3-25-04 561-622-5395  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #