2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 634170

1. Entity Name
SANT LOP CORP.

Principal Place of Business
1321 S.W. 36 AVE.
% LOPEZ EUGENIO GARCIA
MIAMI, FL 33145

Mailing Address
1321 S.W. 36 AVE.
% LOPEZ EUGENIO GARCIA
MIAMI, FL 33145

02172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2031950
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LOPEZ, TERESA
1321 SW 36 AVE
MIAMI, FL 33145

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, 2006 Fee will be $550.00

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

100000455283
03/15/06 -00054-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GARCIA, EUGENIO LOPEZ
STREET ADDRESS	1321 SW 36 AVE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	D
NAME	SANTANDREU, EMILIO
STREET ADDRESS	1321 SW 36 AVE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	D
NAME	SANTANDREU, ANA LOPEZ DE
STREET ADDRESS	1321 SW 36 AVE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	S
NAME	LOPEZ, TERESA
STREET ADDRESS	1321 SW 36 AVE
CITY-ST-ZIP	MIAMI, FL 33145
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 exemptions contained in Chapter 119, 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: Eugenio Lopez — Eugenio Lopez — 2/17/06 — (305) 448-6758
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #