

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005960

Entity Name: SANJO REALTY CORP.

FILED
Feb 02, 2009
Secretary of State

Current Principal Place of Business:

95 THE GLEN
GLEN HEAD, NY 11545

New Principal Place of Business:

7876 GLEN GARRY LANE
DELRAY BEACH, FL 33446

Current Mailing Address:

95 THE GLEN
GLEN HEAD, NY 11545

New Mailing Address:

7876 GLEN GARRY LANE
DELRAY BEACH, FL 33446

FEI Number: 03-0566442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCIARRINO, JOSEPHINE
7876 GLEN GARRY LANE
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCIARRINO, JOSEPHINE
Address: 95 THE GLEN
City-St-Zip: GLEN HEAD, NY 11545

Title: VP () Delete
Name: SCIARRINO, SANTO
Address: 95 THE GLEN
City-St-Zip: GLEN HEAD, NY 11545

Title: ST () Delete
Name: SCIARRINO, JOHN
Address: 20 WEDGEWOOD COURT
City-St-Zip: GLEN HEAD, NY 11545

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCIARRINO, JOSEPHINE
Address: 7876 GLEN GARRY LANE
City-St-Zip: DELRAY BEACH, FL 33446

Title: VP (X) Change () Addition
Name: SCIARRINO, SANTO
Address: 7876 GLEN GARRY LANE
City-St-Zip: DELRAY BEACH, FL 33446

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPHINE SCIARRINO

PRES

02/02/2009

Electronic Signature of Signing Officer or Director

Date