2004 FOR PROFIT CORPORATION

FILED " M

ANNUAL REPORT					Mar 01, 2004 08:00 A		
DOCUMENT: 1. Entity Name JOSEPH C. SANSO	# F9500000412 DNE COMPANY	25				ry of State	
Principal Place of Business 18040 EDISON AVE CHESTERFIELD, MO 6300		Mailing Address 18040 EDISON AVE CHESTERFIELD, MO 63005	US				
	OT WRITE I	N THIS SPA	CE	01272004 4. FEl Numb 43-170	er	PE034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required	
C T CORPORATION 1200 SOUTH PINE IS PLANTATION, FL 33	DO NOT WRITE IN THIS SPACE						
the obligations of registe SIGNATURE Signature, typed of	submits this statement for the red agent. printed name of registered agent and lit FEE IS \$150.00 Fee will be \$550.00	le if applicable. (NOTE Register 9. Election Campaign Fina Trust Fund Contribution.	ed Agent signature required		U000000718	917	
TITLE SANSONE STREET ADDRESS 18040 EDIS CITY-ST-ZIP CHESTERI TITLE SKLEARNAN STREET ADDRESS CITY-ST-ZIP CHESTERI TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE	ECTORS			NOT WRIT	TE.	
NAME STREET ADDRESS							

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. 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 <u>oath</u>; 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 affachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

ML — MALCOLM KLE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/104

6365371700

Daytime Phone #