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FILED

Apr 22 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K40696 (2)

1. Corporation Name

FLORIDA BUSINESS EXCHANGE, INC.

Principal Place of Business

8625 VISTA SHORES CT.  
ORLANDO FL 32836

Mailing Address

8625 VISTA SHORES CT.  
ORLANDO FL 32836-6326



3. Date Incorporated or Qualified

10/24/1988

3a. Date of Last Report

04/29/1996

2. Principal Place of Business

21 7515 DR PHILIPS BLVD

Suite, Apt. #, etc.

22 SUITE 235

City & State

23 ORLANDO FLORIDA

Zip

24 34787

Country

25 USA

2a. Mailing Address

26 353 BLUE STONE CIR

Suite, Apt. #, etc.

27

City & State

28 WINTER GARDEN FLORIDA

Zip

29 34787

Country

30 U.S.A.

4. FEI Number

58-2026025

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SANTIAGO, JAMES, J  
8625 VISTA SHORES CT  
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81 Name

SANTIAGO JAMES J

82 Street Address (P.O. Box Number is Not Acceptable)

353 BLUE STONE CIR

83

84 City

WINTER GARDEN

FL

85 Zip Code

34787

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

James J. Santiago, President James J. SANTIAGO

4/16/97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D SANTIAGO, JAMES J.  
STREET ADDRESS 8625 VISTA SHORES CT  
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME SANTIAGO, JAMES J.

1.3 STREET ADDRESS 353 BLUE STONE CIR

1.4 CITY-ST-ZIP WINTER GARDEN FLORIDA 34787

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for information indicated on this annual report or supplemental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered appears in Block 12 or Block 13 if changed, or on an attachment with an address.

exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the accurate and that my signature shall have the same legal effect as if made under oath; that execute this report as required by Chapter 607, Florida Statutes; and that: my name

SIGNATURE:

James J. Santiago, President James J. SANTIAGO

4/16/97 407-345-4864

Date

Daytime Phone #

CR2E034 (9/96)