

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K93863** (4)

1. Corporation Name  
**THE SANTO GROUP, INC.**



Principal Place of Business: 19667 TURNBERRY WAY SUITE GR-27 NORTH MIAMI BEACH FL 33180  
Mailing Address: 19667 TURNBERRY WAY SUITE GR-27 NORTH MIAMI BEACH FL 33180

3. Date Incorporated or Qualified: 06/08/1989  
3a. Date of Last Report: 04/03/1995  
4. FEI Number: 65-0129185  
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

2. Principal Place of Business: 21  
2a. Mailing Address: 26  
Suite, Apt. #., etc.: 22  
City & State: 27  
Zip: 24  
County: 25  
Zip: 29  
County: 30

9. Name and Address of Current Registered Agent  
**GREEN, ELAINE K.  
19667 TURNBERRY WAY  
NORTH MIAMI BEACH FL 33180**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City: **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	GREEN, GEORGE	
STREET ADDRESS	19667 TURNBERRY WAY#27GR	
CITY-ST-ZIP	N. MIAMI BEACH FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	GREEN, ELAINE K.	
STREET ADDRESS	19667 TURNBERRY WAY	
CITY-ST-ZIP	N. MIAMI BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 Book 12 or Book 13 if changed or on an attachment with an address.

SIGNATURE: George Green (GEORGE GREEN) 2/15/96 305-937-0495  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)