


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 25, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # K93863**  
 1. Entity Name  
**THE SANTO GROUP, INC.**



Principal Place of Business  
**5500 COLLINS AVENUE, #402**  
**MIAMI, FL 33140**

Mailing Address  
**5500 COLLINS AVENUE, #402**  
**MIAMI, FL 33140**



01122006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0129185</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**GREEN, GEORGE**  
**5500 COLLINS AVENUE, #402**  
**MIAMI, FL 33140**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)  
Signature, typed or printed name of registered agent and file if applicable. 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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARTINCAK, LAUREN D 1550 NORTHVIEW DRIVE MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO GREEN, GEORGE 5500 COLLINS AVENUE, #402 MIAMI, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GREEN, TAMMY J 5500 COLLINS AVENUE, STE 1901 MIAMI, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/02/06-80045-024 158.75

**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: *George Green* (GEORGE GREEN) 1/20/06 305 867-6572  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #