FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90027 027 ***150.00

| DOCUN 1. Corporation SANJENI | | ٠. | | | | |
|---|---|--|----------------------------|---------------------------|--|----------|
| Principal Place | of Business | Mailing Address | | | 1 (MONTO) I DEM LAND CENTE FONDE DINE MINI DENIE MENI MENI MENI MENI MENI MENI MENI | |
| 12901 SW 133 | | 12901 SW 133 COURT | | | , , , , , , , , , , , , , , , , , , , | |
| SUITE 105 | | STE 105 | | | DO NOT WEST 111 THE OFFICE | |
| MIAMI FL 33186 MIAMI FL 33186 | | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed | \neg |
| US | | US | | | 08/08/1990 | |
| a Principal Pl | ace of Business | 2a. Mailing Address | | | 4. FEI Number Applied For | \dashv |
| 21 | ace of Bushioss | 26 | | | 65-0211217 Not Applicable | 9 |
| Suite, Apt. #, etc. | | Sulte, Apt. #, etc. | | | SR 75 Additional | 7 |
| 22 | | 27 | | | 5. Certificate of Status Desired Fee Required | |
| City & State | | City & State | City & State | | 6, Election Campaign Financing \$5.00 May Be | |
| 23 | | 28 | | | Trust Fund Contribution Added to Fees | 4 |
| Zip | Country | Zip | Cou | ntry | 8. This corporation owes the current year Intangible | |
| 24 | 25 | 29 | 30 | | Personal Property Tax. | \dashv |
| | 9. Name and Address of Curren | t Registered Agent | | 81 Name | 10. Name and Address of New Registered Agent | \dashv |
| HENNEFORTH, RICHARD 13831 SW 59TH STREET SUITE 101A | | | | | t Address (P.O. Box Number is Not Acceptable) | _ |
| | /II FL 33183 | | | <u> </u> | | _ |
| | | | | 84 City | FL 85 Zip Code | |
| office or re agent. I ar SIGNATURE | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligar Signature, typed or printed name of registered ager | of Florida. Such change was tions of, Section 607.0505, F | authonzed Florida Statu | by the corpo ites. | d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered required when reinstating) | |
| 12. | | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | _ |
| TITLE | P | ☐ DELETE | 1.1 រាវ | | ☐ Change ☐ Addition | ונור |
| NAME | SANJENIS, CARLOS | . 405 | 1.2 NA | | | , |
| STREET ADDRESS | 12901 SW 133RD COURT, STE | : 105 | | REET ADDRESS | 5 | |
| CITY-ST-ZIP | MIAMI FL 33186 | □ DELETE | _ | ry-ST-ZIP | ☐ Change ☐ Addition | |
| TITLE | V CAMUENIO TEDECITA | ☐ DELETE | 2.1 111 | | [] Griange [] Addition | ~' |
| NAME | SANJENIS, TERESITA | 405 | 2.2 NA | | | |
| STREET AODRESS | 12901 SW 133RD COURT STE | 105 | | REET ADORESS | the second of the second secon | |
| CITY-ST-ZIP | *MIAMI FL 33186 , | ☐ DELETE | _ | TY-ST-ZIP | ☐ Change ☐ Addition | on |
| TITLE | | ☐ nereie | 3.1 TIT | | | |
| NAME | | | 3.2 NA | | | |
| STREET ADDRESS | | • | | REET ADORESS TY-ST-ZIP | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 3.4. CI | | ☐ Change ☐ Addition | on |
| ł | | <u> </u> | 4. 2 N | | | |
| NAME STREET ADDRESS | | | | REET ADDRESS | S | |
| | | | | TY-ST-ZIP | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 5.1 TF | | Change Addition | on |
| NAME | | | 5.2 NA | | | |
| STREET ADDRESS | | | 5.3 ST | REET ADDRESS | s | |
| CITY-ST-ZIP | | | 5.4 CF | TY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TI | TLE | ☐ Change ☐ Addition | on |
| NAME | | | 6.2 NA | ME | | Ì |
| STREET ADDRESS | | | 6.3 ST | REET ADDRESS | s | |
| | | | 64.00 | TV_ST_7iP | · · | |

14. 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. 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 reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachmen) with an address, with all other like empowered.

REQUIRE CARLOS SANJENIS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: