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

PROFIT CORPORATION



FILED Secretary of State

Apr 25 1997 8:00am ELORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # SANTIONI'S ENTERPRISES, INC. Principal Place of Business Mailing Address 11531-8 San Jose Blvd. 11531-8 San Jose Blvd. Jacksonville, Fl. 32202 Jacksonville, Fl. 32202 3. Date Incorporated or Qualified 3a. Date of Last Report 7/1/88 4/24/96 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2895763 Not Applicable Suite Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 32223 32223 Yes No 30 Florida Statutes 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BI Name Rothstein, Simon D. 82 Street Address (P.O. Box Number is Not Acceptable) 1530 Atlantic Bank Blvd. Jacksonville, Fl. 32202 83 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. Thereby accept the appointment as registered agent. Lan familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. Singuiting typication princed name of registered agent and titio diapphoable (NOTE Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) DELETE Change Addition 1000 1.1 TITLE PTD 1.2 NAME NAM Santioni, Bruno 1.3 STREET ADORESS STREET ADDRESS 11531-8 San Jose Blyd CEY ST AP 14 CITY-ST-ZIP Jacksonville, Fl. 322 2 1 TITLE Change Addition DITLE 2.2 NAME NAME Santioni, Silvana 11531-8 San Jose Blvd Jacksonville, Fl. 322 STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 01*Y 53 Ze DELETE Change Addition 1110-3 1 1111 E 3.2 NAME 3.3 STREET ADDRESS STRUE ACCIONATION CITY ST 2H 34 CITY-ST-ZIP DELETE Change Addition 1.1kf 4.1 TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP THE SUZI DELETE Change ___ Addition $W \cap \Gamma$ 51 TITLE 52 NAME 4404 5.3 STREET ADDRESS SDS-LAD (RES) 54 CITY-ST-ZIP DELETE Change Addition MILE. 6.1 TITLE 400002156554 -04/28/97--01067--053 1,595 6.2 NAME Silin F. Abres -6.3 STREET ADDRESS ***165.00 14. I do homely certify that the information supplied with this filing does not information indicated set this armual report or supplemental annual report am arroll per or direction of the corporation or the receiver or trustee er map in supplied with this filing does not qualify for the exemption stated or Section 119 07(3)(i). Florida Statutes. I further certify that the main report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that corporation or the receiver or trustee empowered to execute this report is required by Chapter 607. Florida Statutes; and that my name or on an attachment v

SIGNATURE:

3 if changed

Daytime Phone #