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FILED Apr 12, 2000 8:00 am

	ORPORATION NUAL REPORT		Secr	PARTMENT OF STATE nerine Harris retary of State		tary of	
DOC	I INSENIT #	81858	$\overline{}$	FCORPORATIONS	_		
Sant	iioni's Enterpr			•	Ē	13058593	}
Principal P	lace of Business	Mailing A	ddress	n Jose Blvd	_		,
	sonville, Fl 322	Jacks	sonvil	le,Fl 32223	3. Date incorporated or Qualific	EIN THIS SPACE	-
2. Princip	pal Place of Business	Za. Mailin	ng Address		0//01/88	•	
21 Suite, A	Apt. #, etc.	26		<u> </u>	4. FEI Number 59 - 2895763		Applied For
22		Suite,	Apt. #, etc.		5. Certificate of Status Desired	<u> </u>	Not Applicat Additional
City & S	itate	City &			Election Campaign Financing	Fee Rec	Uired
Zip	Country	28 Zip	 -		Trust Fund Contribution	Arided to	May Be Fees
24	25	29		Country 30	This corporation owes the cur Property Tax.	rent year Intangible	e Personal
	9. Name and Address of Cur	rent Registered A	gent		10. Name and Address of New R	X Yes	No
-				81 Name		rogistered Agent	
Kothst	ein, Simon D.			82 Street Addre	ess (P.O. Box Number is Not Accepta	-1-1-1	
1530 7	Atlantic Bank of	.		<u> </u>	t Tarres la Not Accept	ane)	
700 r	Atlantic Bank B	rag ,					
Jackso	onville, Fl 3220	lag . 02 -	• • •	83	*	<u></u>	
Jackso	onville, Fl 3220	02 ^		84 City		85 7io	Code
Jackso	onville, Fl 3220)2 ^ 	. Florida Stat	84 City	Official submits this state.	FL 85 Zip	Code
II. Pursuant registere as registe	to the provisions of Sections 607.0 d office or registered agent, or both ered agent, i am familiar with, and	0502 and 607.1508 n, in the State of Fig accept the obligation	1, 5551.0	84 City	orporation submits this statement for the corporation's board of directors. tes.	FL 85 Zig	Code Code Code Code Code Code Code Code
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to the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that empowered, or on an attachment with an address, with all other like empowered.

Daytime Phone #