

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # N97000003664

1. Entity Name

SANT KILTIREL MAPOU, INC.



Principal Place of Business

Mailing Address

5919-21 NE 2ND AVE
MIAMI FL 33137
US

PO BOX 6146
MIAMI FL 33299
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0766047

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DENIS, JEAN-MARIE
5919-21 NE 2ND AVE
MIAMI FL 33137

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

33137

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME DENIS, JEAN-MARIE
STREET ADDRESS 310 NE 97 STREET
CITY-STATE-ZIP MIAMI SHORES FL 33138

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000767042
CITY-STATE-ZIP 07/05/07-80008-014 70.00

TITLE D ☐ Delete
NAME JULMEUS, ERNST
STREET ADDRESS 5919-21 NE 2ND AVENUE
CITY-STATE-ZIP MIAMI FL 33137

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE TD ☐ Delete
NAME DENIS, RITA
STREET ADDRESS 310 NE 97 STREET
CITY-STATE-ZIP MIAMI-SHORES FL 33138

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE T ☐ Delete
NAME DENIS, TAINA
STREET ADDRESS 310 NE 97TH STREET
CITY-STATE-ZIP MIAMI-SHORES FL 33138

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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:

Jean-Marie Denis

7/2/2007