


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2005 8:00 am
Secretary of State

09-08-2005 90066 044 ***150.00

DOCUMENT # P01000077999	
1. Entity Name CANSAL, INC.	

Principal Place of Business 967 SCANDIA LN. ORLANDO, FL 32825	Mailing Address 967 SCANDIA LN. ORLANDO, FL 32825
-----------------------------------------------------------------------------	-----------------------------------------------------------------

50065457

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



08292005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3735933		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BOSTICK, JOHN 967 SCANDIA LN. ORLANDO, FL 32825		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANUM, LEWIS KM 8.5 A LOS PLANES, RES. EL FARO, CASA A3 SAN SALVADOR, EL SALVADOR, <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Bostick, John 967 Scandia Lane Orlando, FL 32825 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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:

John Bostick Tres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John Bostick

9/2/05

Date

Daytime Phone #

ATTACHMENT

John Bostick
CANSAL, Inc.
967 Scandia Lane
Orlando, FL 32825

50065457
P010000 77999

September 2, 2005

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: CANSAL, Inc.

Dear Sir or Madam:

Enclosed please find the completed annual renewal form (Annual Business Report) for your agency, and a check in the amount of one hundred fifty and 00/100 dollars (\$150.00) as payment in full for our annual renewal fee.

CANSAL, Inc. did not receive its annual renewal notification in a timely manner, and was required to request a new form from you on August 26, 2005. Based upon our corporate counsel's (legal secretary's) conversation with your representative on August 26, 2005, I understand that you will waive the late-filing fee upon receipt of this letter, enclosed payment, and completed ABR form.

Feel free to telephone me if you have any questions or comments related to these matters.

Sincerely,

John Bostick Tre
John Bostick, Treasurer

Enclosures
c: File

