2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000118660 **DOCUMENT #**

1. Entity Name

SIGNATURE:

SANUSA ENTERPRISES INC.



Feb 17, 2003 8:00 am § Secretary of State **FILED**

02-17-2003 90245 043 ***150.00

Principal Place of Business 3750 TERRAPIN LN APT 122 CORAL SPRINGS FL 33067				Mailing Address 3750 TERRAPIN LN APT 122 CORAL SPRINGS FL 33067) (30) (31) (31) (32) (31) (32) (32) (32)				
2. Principal Pla	ace of Busines	,		iling Address									
Suite, Apt. #				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State	L SPR	INGS FL	City	City & State				4. FEI Number 26-0016215 Applied For Not Applicable					
Zip 33 (_	Country	Zip	Zip Cour				5. Certificate of Status Desired S8.75 Additional Fee Required					
		nd Address of Curren	ıt Register	tegistered Agent				7. Name and Address of New Registered Agent					
BETTINA CARDENAS, CLAUDIA							Name JESUS E. AMADOR						
CORAL SPRINGS FL 33067						Street A	37	22	ox Number is Not Acceptabl TENRAPIN	<u>~N</u>	# 1900	6	
CORAL SP	MINGO FL S	0 10		>		City	Pa	RA	L SPRINGS	F	Zip Code	33067	
8. The above r	named entity	abmits this statement	for the purp	pose of changing its	registere	d office or							
8. The above named entity of omits 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 registering the state of Florida. I am familiar with, and accept the obligations of registering the state of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with accept the obligations of registered agent, or both, in the State of Florida.													
SIGNATORIA	Signature, vped or	printed name of egistered ages	nt and title if ap	plicable (NOTE	: Registere	d Agent signat	ure required	when rei	instating)	DATE	•		
FILE NOW!!! FEE S \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing Trust Fund Contribution. Added to Fees													
10.	rayable to i	OFFICERS ANI		700	11.			ADI	DITIONS/CHANGES TO OF	FICERS AN	ID DIRECTORS	S IN 11	
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	JESUS	E. AMADO	とり	#1906	NAM	e et adoress	<i>36</i> 5		E. AMADOR TERRAPIN L	AJ #	1906		
STREET ADDRESS CITY-ST-ZIP		SPRINGS,	FL	33067		-ST-ZIP	372				33067		
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NAME STREET ADDRESS					NAMI STRE	et address							
CITY-ST-ZIP		/	^	1		-ST-ZIP							
12. I hereby ce indicated of the corp	ertify that the in on this report o oration or the	nformation supplied wi or supplemental report receiver or trusted emi	th this filing is true and bowered	does not qualify for accurate and that me execute this report	the exemple the signal through t	mption stat ture shall h red by Cha	ted in Sec ave the s opter 607,	ction 1 ame le Florid	19.07(3)(i), Florida Statutes. egal effect as if made under fa Statules; and that my nam	I further o oath; that se appears	ertify that the in I am an officer in Block 10 or	nformation or director Block 11 if	

MREVESUS E. AMADOR /PD 02/12/03 (954) 575-1509