

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127103

Entity Name: SANTOS BURGOS CORP.

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

6096 E COLONIAL DRIVE
ORLANDO, FL 32807 FL

New Principal Place of Business:

Current Mailing Address:

6096 E COLONIAL DRIVE
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 05-0626760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIGLIO-BENKIRAN, MICHELE G
BENKIRAN & MALARET, P.A.
1999 W. COLONIAL DRIVE, STE. 204
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: SANTOS, MARISOL
Address: 109 EAST CHESTER STREET
City-St-Zip: MINNEOLA, FL 34715 US

Title: D,VP () Delete
Name: SANTOS, DR. LEONOR
Address: 10621 MASTERS DRIVE
City-St-Zip: CLERMONT, FL 34711 US

Title: D,S () Delete
Name: SANTOS, LUIS
Address: 1140 COVINGTON STREET
City-St-Zip: OVIEDO, FL 32765 US

Title: D,T () Delete
Name: BURGOS, GLORIA M
Address: 1140 COVINGTON STREET
City-St-Zip: OVIEDO, FL 32765 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARISOL SANTOS

DP

01/07/2008

Electronic Signature of Signing Officer or Director

Date