## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

1. Corporation Name

P93000079654 (8)

SAINT JOSEPH CORPORATION

<i>5, 1,</i> 1, 1						
Principal Place of Business Mailing Address						SK MORSE MOTER TOOTO JOITA OLEAN USTER UTAL ESON
SS26 BROOKLINE DRIVE ORLANDO FL 32819 US		7512 DR PHILLIPS BLVD STE 50-262 ORLANDO FL 32819 US				
				3. Date Incorporated or Qualified 11/18/1993	3a. Date of Last Report 04/05/1995	
Principal Place of Business     The Principal Place of Business		2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·		4, FEI Number 59-3212050	Applied For Not Applicable
Suite, Apt. #, etc.		Suite Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>23</b> Zip	Zip Gountry		Zip: Country		This corporation has liability for intangible tax under s=199.032,     Florida Statutes	
24	25 25 Name and Address of Curren	1 Registered Agent	30]		10. Name and Address of New R	
	W. Halle and Address of Control	thegistered rigon	81	Name 🗚		
BOWEN, DAVID C				Name MECKALAUAGE LEONARD Street Address (P.Q. Box Number is Not Acceptable)		
	ARLBERRY DR		82	2607	EAGLES NEST CT	<u>•</u>
1	DO FL 32819		B3			
0.00	50 12 02010		84	Ctv A		85 -Zig Cedy
				UK	-1 (10 -0	FL    \$285
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the above	named corpor	ration submits this statement for the pur rd of directors. I hereby accept the appo	pose of changing its registered office   pintment as registered agent. I am
or registere familiar with	n agent, or both, in the state of rional nand acceptine obligations of Secti	ion 607.050 <b>5, H</b> onda Statute				
SIGNATURE <	Tronon !!	Technolow	e_ Le	ONARD	MECKALANAGE	4-12-86
ļ <u></u>	Signature: typed or printed name of registeres adject OFFICERS ANI	DIDECTORS #	NOTE Registered Age	a t signature, requier	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
12.	P	DELETE 1			NEBITIONS OF A VIOLES TO STATE	Change Addition
NAME	•	DAHRUJ, JOSE JR				
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 01		1.4 CiTY -	ST-Ziff		
TITLE	٧	<b>⊠</b> DELETE 2				Change 🔲 Addition
NAME	BOWEN, DAVID C		2.2 NAM5			
STREET ADDRESS	6088 MARLBERRY DR		2.3 STREET ADDRESS			
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NAME			6.2 NAM	i i		
STREET ADDRESS			. 63 STHE	er adoress		:

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 extinc exportation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 or an attachment with an address

SIGNATURE:

JOSE DAHRUD JR.

05/27/96