FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

7512 DR PHILLIPS BLVD

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Piace of Business

5526 BROOKLINE DRIVE

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 23 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000079654** (8)

SAINT JOSEPH CORPORATION

ORLANDO FL 32819 US		STE 50-262 ORLANDO FL 32819-5100					
		US			3. Date Incorporated or Qualified 11/18/1993 06/05/1996		
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
21		26	26		59-3212050		Not Applicable
Suite, Apt. #, etc.		L	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	5 Additional Required
City & State		City & State			6. Election Campaign Financing	\$5.0	0 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country	y	8. This corporation has liability for in	ntangible tax unde	r s. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Cu	rent Registered Agent			10. Name and Address of New Reg	jistered Agent	
MEC	KALAUAGE, LEONARD		81	Name			
	EAGLES NEST CT.		82	82 Street Address (P.O. Box Number is Not Acceptable)			
	ANDO FL 32837			Street Address (F.O. Box Number is Not Acceptable)			
0112			83				
			84	City		FL 85 2	ip Code
agent. La SIGNATURE	n familiar with, and accept the ob-	oligations of, Section 607.050	05, Florida Statute	·\$.	tion's board of directors. I hereby acceptions when reinstaund	DATE	
12.	,,,,,	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12
Tille	P	DELET			- I August I	Chang	
NAME	DAHRUJ, JOSE JR		1.2 NAME				
SUBLITADORESS			1.3 STREE	T ADDRESS			
CITY - ST - ZIP	ORLANDO FL 01		1.4 City-	- 1			
TILLE	VIII VIII VIII VIII VIII VIII VIII VII	☐ DELET			· · · · · · · · · · · · · · · · · · ·	Chang	ge Addition
NAME			2.2 NAME	1			
STREET ADDRESS			2.3 STRFF	T ADDRESS			
CITY - ST - ZIP			2. 4 CITY-	- 1			
THEF		DELET				Chang	e Addition
NAME			3.2 NAME				
STREET ADORESS			l l	T ADDRESS			
CITY SI-ZP			3.4. CITY -	- 1			1
III.£	er en en en en en er et d'Arman en	DELET		7. 2		☐ Chang	ge 🔲 Addition
NAME			4. 2 NAME	:			
STREET ADDRESS			4.3 STREE	T ADDRESS			
CHTY - S1 - ZiP			4.4 CITY-	I .			
THUE		☐ DELET				Chang	ge Addition
NAMI			5.2 NAME	[
STREET ADORESS			5.3 STREE	T ADDRESS			
CHY-ST-70			5.4 CITY-				
TILL		DELET				Chang	ge 🔲 Addition
NAMS			6.2 NAME				
STREET ACIDRESS				T ADDRESS			
City - St - ZiP			6.4 CiTY-1				
14. I do heret	y certily that the information sup	plied with this filing does not	qualify for the ex-	emption states	d in Section 119.07(3)(i), Florida Statutes	s. I further certify the	nat the
informatio Lam an o appears i	n indicated on this annual report ficer or director of the correctable n Block 12 or Block 13 inchan	or supplemental annual repo ne receiver or trustee et a, o on an attachment with a	ort is true and acc mpowered to exe in address.	urate and tha cute this repo	t my signature shall have the same lega rt as required by Chapter 607, Florida S	leffect as if made tatutes; and that m	under oath; that ny name