

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

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P 94 000000 145
1. Corporation Name

SONTAG, INC

Principal Place of Business

Mailing Address

3005 W. Lake Mary Blvd
Lake Mary, FL 32746

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 3005 W. Lake Mary

Suite, Apt. #, etc.

22 Suite 120

City & State

23 Lake Mary, FL

Zip

24 32746

25 FLA

2a. Mailing Address

26 same

Suite, Apt. #, etc.

27 City & State

28 Lake Mary, FL

29 32746

Country

30

3. Date Incorporated or Qualified

1/3/94

4. FEI Number

59-3216682

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Albert SONTAG
3005 W. Lake Mary Blvd
Suite 120
Lake Mary, FL 32746

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent. I am, family with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Leon Sontag

Signature of the person making this statement (to be typed)

(If filer is Registered Agent, signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Albert SONTAG
3005 W. Lake Mary
Lake Mary, FL 32746

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

100002563711

-06/18/98-01017-005

***550.00

PC

6-17

14. I hereby certify that the information supplied with this form does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information
indicated on this annual report or supplementary 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 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 12 or Block 13. I changed or corrected an entry with an address.

SIGNATURE:

Leon SONTAG

6/8/98

407-323-4186

CR2E034 (10/97)