

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

CORPORATION ANNUAL REPORT 1995 **5-1-95**

FLORIDA DEPARTMENT OF STATE
 Sandra B. Minkham
 3-5562
 DIVISION OF CORPORATIONS

DOCUMENT # **P94000011402 (2)**

1. Corporation Name:
SAINTS TOO INC.

Principal Place of Business: **5852 ELLIS HOLLOW ROAD EAST LAKE WORTH FL 33463**

Mailing Address: **5852 ELLIS HOLLOW ROAD EAST LAKE WORTH FL 33463**

APPROVED AND FILED

95 MAY -1 AM 8:41

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2. Principal Place of Business: **21**

2b. Mailing Address: **26**

22. Suite, Apt. #, etc: **27**

23. City & State: **28**

24. Zip: **25** Country: **30**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/03/1994**

3a. Date of Last Report:

4. FEI Number: **65-0466676**

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. The corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent:

ST. GEORGE, KEVIN
5852 ELLIS HOLLOW ROAD EAST
LAKE WORTH FL 33463

10. Name and Address of New Registered Agent:

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 607.0102 and 607.1506 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 familiar with, and accept the obligations of, Section 607.0106, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

11.1 NAME	D
11.2 NAME	ST. GEORGE, CHERYL
11.3 STREET ADDRESS	5852 ELLIS HOLLOW ROAD EAST
11.4 CITY, ST. ZIP	LAKE WORTH FL 33463
11.5 NAME	D
11.6 NAME	ST. GEORGE, KEVIN
11.7 STREET ADDRESS	5852 ELLIS HOLLOW ROAD EAST
11.8 CITY, ST. ZIP	LAKE WORTH FL 33463
11.9 NAME	
11.10 NAME	
11.11 STREET ADDRESS	
11.12 CITY, ST. ZIP	
11.13 NAME	
11.14 NAME	
11.15 STREET ADDRESS	
11.16 CITY, ST. ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 NAME	
12.3 STREET ADDRESS	
12.4 CITY, ST. ZIP	
12.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 NAME	
12.7 STREET ADDRESS	
12.8 CITY, ST. ZIP	
12.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 NAME	
12.11 STREET ADDRESS	
12.12 CITY, ST. ZIP	
12.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.14 NAME	
12.15 STREET ADDRESS	
12.16 CITY, ST. ZIP	

14. I do hereby certify that the information provided with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 619.07(1)(b), Florida Statutes. I further certify that the information indicated by 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. I am an officer or director of the corporation or the receiver or guardian empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in the 12 of this report or on an attachment with an address.

SIGNATURE: **KEVIN ST. GEORGE** **4-29-95** **407 642-4563**

SIGNATURE AND TYPE PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR