HADORITO CORPORATION Services of State Services ANNUAL REPORT 1996 DOCUMENT # POUL DOD 2894 R. P. P. Co. Janes Inc. Mainty Address Mainty Address Principal Place of Business Mainty Address Mainty Add	, F.以E NOW: FILING FEE AFTER MAY 1 IS	\$225.00			
DOCUMENT # POUD 20894 96 OCT 29 AN III: 06 R.P. P. CO. Jones Inc. Principal Place of Business Prin	CORPORATION Sandra B. ANNUAL REPORT Secretary	Mortham of State			
96 OCT 29 AM HI: 06 SECRETARY OF STATE TALLAHASSEE, FLORIDA Mamp Address Warmy Address HID W. 20 ANE # 300 HID W 20 ANE # 300 Hindeah, FL 33016 Hindeah, FL 33016 In proper Pase of Business 27 1400 W. 20 ANE # 300 Sulfe, April & Co. Sulfe		001	FILED		
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28 SOLV 28 SOLV 28 SOLV 29 SOLV 30 DACK Florida Statutes Yes EARG		Country			
Angello K. Santisteban Alto wood once it address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statutes. The above named corporation submits this statement for the pursuant of the provisions of Sections 607 0502 and 607, 1508, Florida Statutes. The above named corporation submits this statement for the pursuant for the spring its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered signal and the floridation of Section 807, 0505, Florida Statutes. 11. Pursuant to the provisions of Sections 607, 0506, Florida Statutes. 12. OFFICERS AND DIRECTORS. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. Thrite 12. OFFICERS AND DIRECTORS IN 12. 11. Thrite 12. OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. Converse of the provision o	24 55014 25 DAde 29 55014 3	¬ ` ` ` \ .	Florida Statutes Yes Who		
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Hi Aleuh, FL 33010 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Fiorida 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 are taken accept the adaption of, Section 607.605. Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or required agent are taken accept the adaption of Section 607.605. Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the corporation's board of directors. I hereby accept the appointment as registered agent agent are taken appointment as registered by the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered or the corporation's board of directors. I hereby accept the appointment as registered or the corporation's board of directors. I hereby accept the appointment as registered or the corporation's appointment as registered and the corporation and the corporation's appointment and appointment are registered and accept	m lash	82 Street Addi	ress (P.O. Box Number is Not Acceptable)		
Section Sections	110- 00 00 1-110 -H 290	83			
11. Pursuant to the provisions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent and title it appricable. Printed Signature typed or printed hard of registered agent agent and title it appricable. Printed Signature typed or printed hard of registered agent agent and title it appricable. Printed Signature typed or printed hard of registe	HIAKON 1 1- 22010	84 City		85 Zip Code	
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12.	office or registered agent, or both, in the State of Florida. Such change was au agent. I am familiar with, and accept the obligations of, Section 607.0505, Flori	ithorized by the corporational statutes.	tion's board of directors. I hereby accept the app	pointment as registered	
DELETE	SIGNATURE Signature Typed or printed name of registered agent and title if applicable (NOTE	Registered Agent signature requir	red when reinstating) DATE		<u>ر</u>
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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	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE	1 4 City - ST- ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 City - ST- ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST- ZIP 4.1 TITLE 4.2 NAME 43 STREET ADDRESS 4.4 CITY - ST- ZIP 5 1 TITLE 52 NAME 53 STREET ADDRESS 5.4 CITY - ST- ZIP 6 1 TITLE 62 NAME	-10/29/960	Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition	CR2E034 (1)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DELECTOR DELECT

ANGELO KURT SANTISTEBAN 1011 NW 111TH AVENUE MIAMI, FLORIDA 33072

SECRETARY OF STATE DIVISION OF INCORPORATION PO BOX 6327 TALLAHASSEE, FLORIDA 32314

DEAR SIR:

I AM REQUESTING THAT MY CORPORATION WHICH WAS DISSOLVED BECAUSE OF NON-PAYMENT ON AN ANNUAL BASES. ENCLOSED PLEASE FIND A CHECK IN THE AMOUNT OF \$225.00 TO REINSTATE THE CORPORATION WHICH IS NAMED AS FOLLOW: A.P.P. CO. JONES, INC. P94000029894 FILED ON APRIL 18, 1994.

THE REASON THAT THE CORPORATION WAS DISSOLVED WAS BECAUSE OF MY CHANGE OF ADDRESS.

I SINCERELY REGRET ANY INCONVENIENCE CAUSED AS A RESULT.

VERY TRULY YOURS,

ANGELO KURT SANTISTEBAN