PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

4000

STREET ADDRESS

CITY-ST-ZIP

Ĺ	1996	DIVISION O	F CORPOR	RATIONS		
DOCUI	MENT # P940	00041380 (4	1)			
SANTIA	AGO TRADING USA, INC) 				
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Principal Place	of Rucinese	Mailing Address			##################################	
SUITE 340 SUITE 340			אוטכ			
ST. PETERSE	BURG FL 33701	ST. PETERSBURG FL	33701		Date Incorporated or Qualified	3a. Date of Last Report
					05/17/1994	04/28/1995
h	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt.	# etc	26 Suite Act # etc	Suite, Apt. #, etc.		65-0493359	Not Applicable
22	π, σιο.	27 Suite, Apr. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & St			te		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	30 Co	untry	8. This corporation has liability for Florida Statutes	r intangible tax under s 199.032, es □ No
	9. Name and Address of Cu		130		10. Name and Address of New	
				81 Name		
BIERLEY, JOHN C				82 Street Addre	ess (P.O. Box Number is Not Accept	able)
111 E. MADISON STREET SUITE 2400				83		
TAMPA FL 33602						
				84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 637.0	0502 and 607.1508, Florida Statu	tes, the abo	ove-named corpora	ation submits this statement for the p	urpose of changing its registered office pointment as registered agent. I am
familiar wit	th, and accept the obligations of, S	Section 607.0505, Florida Statute	zed by trie S.	corporation s boar	d or directors. I hereby accept the ap	pointment as registered agent. I am
SIGNATURE _	Signature, typed or printed name of registered a	paget and till if applicable	OF BEEN	d Agent signature required		
12.		AND DIRECTORS	13.	D Agent signature required	· ·· · · · · · · · · · · · · · · · · ·	FICERS AND DIRECTORS IN 12
TITLE	PARKER, J. KENNETH		1. 1 1	TITLE		☐ Change ☐ Addition
NAME			1.2 N	- i		
STREET ADDRESS CITY-ST-ZIP	S 800 SECOND AVE. SOUTH, SUITE 340 ST. PETERSBURG FL			TREET ADDRESS		
THILE	DP	DELETE	2.11	HTY-ST-ZIP		Change Addition
NAME	CROOK, GEORGE			IAME		
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP TITLE	ST PETERSBURG FL DST			ITY-ST-ZIP		510
NAME	LANG, JAMES T.		3 1 1 3.2 N			Change Addition
STREET ADDRESS	800 SECOND AVENUE SOUTH SUITE 340		4	STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL			ITY-ST-ZIP		
TITLE		☐ DELETE	4. 1 T	TITLE		Change Addition
NAME			4.2 N			
STREET ADDRESS				TREET ADDRESS		
CITY-S1-ZIP TITLE		☐ DELETE	5 1 T	ITY-ST-ZIP		Change Addition
NAME		_	52 N			
STREET ADDRESS			ľ	TREET ADDRESS		
CITY-ST-ZIP				ITY-ST-ZIP		·
TOTLE		☐ DELETE	6.17			☐ Change ☐ Addition
NAME	l		6.2 N	AME I		

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 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 15 if changed, or on an attachment with an address. QNA PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

6.3 STREET ADDRESS

6.4 CHTY - ST - ZIP

U-2296 Date Daytime Phone #