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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000044743 (0) DOCUMENT #

1. Corporation Name

SANTANA SUBS, INC. Principal Place of Business Mailing Address SANTANA SUBS INC. 1132 ROYAL PALM BLVD. 1132 ROYAL P. BCH BLVD. ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH DO NOT WRITE IN THIS SPACE PALM BEACH FL 33411 3. Date Incorporated or Qualified 06/15/1994 2. Principal Place of Business
1 1139 Royal Palm Bon Blud 2a. Mailing Address 4. FEI Number Applied For 3 mme 65-0497918 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 Tily & State City & State 8. Election Campaign Financing \$5.00 May Be Palm Buh houal 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible F١ 1 Yes ☐ No 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAMOS, FRANCISCA 1132 ROYAL PALM BEACH BLVD. 62 Street Address (P.O. Box Number is Not Acceptable) **ROYAL PALM BEACH FL 33411** 83 City 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 lam liar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE RAMOS, FRANCISCA NAME 1.2 NAME 1132 ROYAL PALM BEACH BLVD. STREET ADDRESS 1.3 STREET ADDRESS ROYAL PALM BEACH FL 33411 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City-St-Zip DELETE ☐ Change Addition TITLE S 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 dornoration 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 if changed, or on an attachment with an address.

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FILED

Feb 20 1998 8:00am

Secretary of State