

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000025025

FILED
May 03, 2004
Secretary of State

Entity Name: SAINZ, INC.

Current Principal Place of Business:

10075 GATE PARKWAY NORTH
APT 602
JACKSONVILLE, FL 32246

New Principal Place of Business:

1026 GALLANT FOX CIRCLE S
JACKSONVILLE, FL 32218 US

Current Mailing Address:

10075 GATE PARKWAY NORTH
APT 602
JACKSONVILLE, FL 32246

New Mailing Address:

1026 GALLANT FOX CIRCLE S
JACKSONVILLE, FL 32218 US

FEI Number: 59-3305811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAINZ, ARMANDO A
10075 GATE PARKWAY NORTH
APT 602
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

SAINZ, ARMANDO A
1026 GALLANT FOX CIRCLE S
JACKSONVILLE, FL 32218 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

05/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SAINZ, ARMANDO A.
Address: 10075 GATE PARKWAY NORTH #602
City-St-Zip: JACKSONVILLE, FL 32246

Title: VD () Delete
Name: SAINZ, STEPHANIE M.
Address: 10075 GATE PARKWAY NORTH #602
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAINZ, ARMANDO A.
Address: 1026 GALLANT FOX CIRCLE S
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD (X) Change () Addition
Name: SAINZ, STEPHANIE M.
Address: 1026 GALLANT FOX CIRCLE S
City-St-Zip: JACKSONVILLE, FL 32218

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE M. SAINZ

VD

05/03/2004

Electronic Signature of Signing Officer or Director

Date