

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000073331 (7)**

1. Corporation Name

J.S. SANTOS, INC.



Principal Place of Business

**12400 SW 2ND STREET
PLANTATION FL 33325**

Mailing Address

**12400 SW 2ND STREET
PLANTATION FL 33325**

2. Principal Place of Business

21 **12400 S.W.**

Suite, Apt. #, etc.

22 **2ND ST.**

City & State

23 **PLANTATION**

Zip

24 **33325**

Country

25 **USA**

2a. Mailing Address

26 **12400 S.W.**

Suite, Apt. #, etc.

27 **2ND ST.**

City & State

28 **PLANTATION**

Zip

29 **33325**

Country

30 **USA**

3. Date Incorporated or Qualified

09/21/1995

3a. Date of Last Report

4. FEI Number

65-0607835

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**SANTOS, GEORGINA
12400 SW 2ND STREET
PLANTATION FL 33325**

10. Name and Address of New Registered Agent

81 Name

N/A

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PV
SANTOS, JOSE S**
STREET ADDRESS **12400 SW 2ND STREET**
CITY-ST-ZIP **PLANTATION FL 33325**

TITLE ☐ DELETE

NAME **TS
SANTOS, GEORGINA**
STREET ADDRESS **12400 SW 2ND STREET**
CITY-ST-ZIP **PLANTATION FL 33325**

TITLE ☐ DELETE

NAME **N/A**
STREET ADDRESS **N/A**
CITY-ST-ZIP **N/A**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 13, if changed, or on an attachment with an address.

SIGNATURE:

SANTOS, JOSE S

4/29/96

Date

(954) 370-8564

Daytime Phone #

CR2E034 (12/95)