

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000048242

Entity Name: SANTILANDIA INC.

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

8877 COLLINS AVE
#601
SURFSIDE, FL 33154

New Principal Place of Business:

Current Mailing Address:

8877 COLLINS AVE
#601
SURFSIDE, FL 33154

New Mailing Address:

FEI Number: 65-0670959

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, EDUARDO
8877 COLLINS AVE
601
SURFSIDE, FL 33154 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SANCHEZ, EDUARDO I
Address: 8877 COLLINS AVE, #601
City-St-Zip: SURFSIDE, FL 33154

Title: D () Delete
Name: SANCHEZ, FUENSANTA
Address: 8877 COLLINS AVE, #601
City-St-Zip: SURFSIDE, FL 33154

Title: D () Delete
Name: CZETYRKO, CLAUDIA
Address: 7660 SW 83 COURT
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: SANCHEZ, EDUARDO F
Address: 15399 SW 13 TERRACE
City-St-Zip: MIAMI, FL 33194

Title: D () Delete
Name: SANCHEZ, MARIA L
Address: 15446 SW 138 COURT
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CLAUDIA CZETYRKO

DIR

04/24/2009

Electronic Signature of Signing Officer or Director

Date