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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000092540 (9)

SANTALO CONSULTING, INC.

FILED										
May	16	1997	8:00am							
Sec	cret	ary of	State							

Principal Place of Business Mailing Address						! 	ELIK dini se ki dini		 	(60 11 (06 1	
6265 SW 88TH MIAMI FL 33173	COURT	6265 SW 88TH COURT MIAMI FL 33173-1626									
							3. Date Incorporate 11/12/1996	ed or Qualified	3a. Dai	te of Last R	eport
- ,	ace of Business	2a, Mailing Address					4, FEI Number	0713			oplied For
21 Suite, Apt. ≢	1 etc	Suite, Apt. #, etc.					07-010	4217			ot Applicable Additional
22	, 00	27	•				5. Certificate of Sta	itus Desired			Acomonal equired
City & State	ALLE ALLE ALLE ALLE ALLE ALLE ALLE ALLE	City & State					6. Election Campai	gn Financing		\$5.00	May Be
23		28	<u>.</u>		<u>.</u>		Trust Fund Contr	ribution			to Fees
Ζφ 771	Country	Zip	Couliti	ry			8. This corporation				. 199.032,
24	25 9. Name and Address of Current		30 1				Florida Statutes 10. Name and Addr		Yes 7		
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	SALZEDO ST		8:	2 5	treet A	ddres	s (P.O. Box Number	is Not Acceptabl	(e)		
COR	AL GABLES FL 33134					00.00	o (i io. cox riambor	io riot rioeopiao			
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			B	4 C	ity					85 Zip	Code
	10-1	1 007 4500 Ft14- Out 4-		<u> </u>					FL	<u> </u>	
office or re	o the provisions of Sections 607.0502 g-stered agent, or both, in the State of	of Florida. Such change was au	ithorized b	ov the	amed d	orporation	ation submits this sta n's board of directors	tement for the pr . I hereby accep	urpose or t the appo	changing i sintment as	s registered registered
agent Lan	n familiar with, and accept the obliga	tions of, Section 607.0505, Flor	ida Statute	85.							
SIGNATURE :	Signatine, typed or printed name of registered agen	I and title if applicable. (NOTE:	Appistered A	gent sig	onalure re	equired :	when reinstating)		DATE		
12.	OFFICERS AND	····	13.				ADDITIONS/CHAP	NGES TO OFFIC	ERS AND	DIRECTOF	RS IN 12
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HAME			6 2 NAME		ĺ						
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information Lam an off	y certify that the information supplied indicated on this annual report or hice or director of the corporation or a Block 12 or Block 13 if changed, or	applemental annual report is truthe receiver or trustee empower on an attachment with an addr	e and acc red to exe ess.	curate	e and t	hat m	y signature shall have	e the same legal	effect as	if made un	der oath, that