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

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

21

22

23

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000081702 (7)

SANFIEL SEP TECH SERVICES, INC.

Country

AMERILAWYER CHARTERED
343 ALMERIA AVENUE

9. Name and Address of Current Registered Agent

Principal Piace of Business Mailing Address

13842 76TH ROAD NORTH 13842 76TH ROAD NORTH
W PALM BEACH FL 33412 W PALM BEACH FL 33412

2a. Mailing Address

City & State

Ζip

28

29

Suite, Apt. #, etc.

FILED Feb 09 1998 8:00am Secretary of State

DO NOT WRIT Date Incorporated or Qualified 09/22/1997		SPACE
FEI Number	<del></del>	Applied For
65-0786220 Certificate of Status Desired		Not Applicat \$8.75 Additional Fee Required

8. This corporation owes or has paid the current year Intangible

\$5.00 May Be

Added to Fees

X Yes

3.

4.

5.

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

CC	DRAL GABLES FL 33134	62 Silber	3842 16th ROAD NORTH	
		83		
		84 City	1. PALM BEACH FL 85	Zip Code
11. Pursuant	to the provisions of Socions 607.0502 and 607.1508, Florida Statute	es, the above named	corporation submits this statement for the purpose of change	
office or r agent. I a	to the provisions of Soctions 607.0502 and 607.1508, Florida Statute egistered agents of John, in the State of Torion Such change was a m familiar with and accept the option of Soction 607.0505, Flo	uthorized by the corp rida Statutes.	poration's board of directors. I hereby accept the appointment	nt as registered
SIGNATURE (		Registered Agent signature	a required when reinstations	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	CTORS IN 12
TITLE	PTD DELETE	1.130146	☐ Cha	
NAME	SANFIEL, NOEL A	1.2 NAME		
STREET ADDRESS	13842 76TH ROAD NORTH	1.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BEACH FL 33412	1.4 CITY - ST - ZIP		
TITLE	SVD DELETE	2.1 TITLE	☐ Cha	ange Addition
NAME	Sanfiel, Luisa	2 2 NAME		
STREET ADDRESS	13842 76TH ROAD NORTH	2.3 STREET ADDRESS		ſ
CITY-ST-ZIP	W PALM BEACH FL 33412	2.4 CITY - ST- ZIP		
TITLE	DELETE	3.1 TITLE	☐ Cha	ange 🔲 Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - 7IP		
TITLE	DELETE	4.1 TITLE	☐ Cha	ange 🔲 Addition
NAME		4.2 NAME		1
STREET AODRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	] □ Cha	ange 🔲 Addilion
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	DELETE	6.1 TITLE	☐ Cha	ange 🔲 Addilion
NAME		6.2 NAME		ĺ
STREET ADDRESS		6 3 STREET ADDRESS		i
CITY-ST-ZIP		6.4 City - St - ZiP		

Country

30

14. Thereby 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 eath; 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 charged, or on an attentional user an address.

CICMATURE.

1/30/98 /82/189-8534