



State of Florida
Office of State Treasurer
Tallahassee, Florida

FOR OFFICIAL USE	
DATE	NUMBER
09/20/1999	00879

DEBIT MEMORANDUM

P 99 0000 76372

To: DEPT. OF STATE

General Revenue Total	0.00	
Trust Total	283.75	
Other Total	0.00	000003030040--4
Total	\$283.75	

Distribution

Cross Ref	Samas Code	Reason	Amount
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	25.00
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	150.00
012	45-20-2-130001-45300000-00-000100-00	OTHER	30.00
012	45-20-2-130001-45300000-00-000100-00	OTHER	78.75

Grand Total: **\$283.75**

00879-D

RECEIVED
OFFICE OF
TREASURY AND
FINANCE
SEP 22 1999

99 SEP 22 PM 12:36

The above named fund(s) has been reduced by the amount of this check(s) under the authority of Section 215.34, F.S.

Bill Nelson

Process Date: 08/26/1999

State Treasurer

Dr. Charles M. Anthony

GUARDRAIL SAFETY VALUE WITH

of all the "blackboard" models of the mind.

ENDORSE HERE

X DEPT OF STATE 4500453
FOR DEPOSIT ONLY
-08/23/99--01121--012
1009069796 *****78.75
2226 35081

NR 24 99

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1009069796 EX 10024/99
1009069796 EX 10024/99

5940713533

E 7040060194 9926 00 082499

IMPORTANT
has been processed
If you do not see
Document and
Pattern, do not
U.S. Patent No. 5,515,192

08/26/99 0022 01957 01

C 6940077057 9926 59



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 29, 1999

Santokarma, Inc.
100 NE 2nd Ave.
Miami, FL 33132

SUBJECT: SANTOKARMA, INC.
Ref. Number: P99000076372

Debit Memo #: 00879-D

This is to inform you that your check #Counter Check dated August 19, 1999 in the amount of \$78.75 and submitted for SANTOKARMA, INC. has been returned to us by your bank because of More Information Required on Account.

We request that you remit a cashier's check or money order in amount of \$93.75 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Melinda Lilliston
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call
(850) 487-6900.

Sincerely,
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 899A00047482



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 1, 1999

Santokama, Inc.
100 NE 2nd Ave.
Miami, FL 33132

SUBJECT: SANTOKARMA, INC.
Ref. Number: P99000076372

Debit Memo #: 00879-D

Due to your failure to respond to our previous letter advising you of the returned check #Counter Check, the Articles of Incorporation for SANTOKARMA, INC. have been cancelled and are considered not filed as of November 1, 1999.

The name of your corporation is now available for use.

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 999A00052165