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

FILED **PROFIT** Apr 24 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT** # V66313 (O) SANTORO (PHASE I), INC. Principal Place of Business Mailing Address 3049 NE 163 ST 3049 NE 163 ST NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/24/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0357799 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes □Ño 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Bi WHITE, NANCY Klein, 3049 N.E. 163RD STREET 82 N. MIAMI BEACH FL 33160 83 84 Hilliam 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 (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. **DPS** TITLE DELETE 1.1 TITLE Change Addition **SREDNI, ISAAC** NAME Street PH-1 191 3N 878G **3049 NE 163RD ST** STREET ADDRESS 1.3 STREET ADDRESS N. MIAMI BEACH FL CITY-ST-ZIP 1.4 CITY+ST-ZiP DELETE 21 TITLE Addition **SREDNI. MIRIAM** NAME 2875 NG 191 Street PH-1 Turnberry Plaza 22 NAME 3049 NE 163 ST STREET ADDRESS 23 STREET ADDRESS N. MIAMI BEACH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE TITLE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing doze 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 an odi report is true and accurate age 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 of 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