

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 634170

**Entity Name:** SANT LOP CORP.

**Current Principal Place of Business:**

5300 W 16 AVE, APT 319  
% EMILIO A. SANTANDREU  
HIALEAH, FL 33012

**Current Mailing Address:**

5300 W 16 AVE, APT 319  
% EMILIO A. SANTANDREU EPWORTH VILLAGE  
HIALEAH, FL 33012 US

**FEI Number:** 59-2031950

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SANTANDREU, EMILIO A SR.  
5300 W 16 AVE  
APT 319  
HIALEAH, FL 33012 US

*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:** EMILIO A SANTANDREU

05/15/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name SANTANDREU, EMILIO A  
Address 5300 W 16TH AVE  
APT 319  
City-State-Zip: HIALEAH FL 33012

Title D  
Name LOPEZ DE SANTANDREU, ANA  
Address 5300 W 16TH AVE  
APT 319  
City-State-Zip: HIALEAH FL 33012

Title DIRECTOR  
Name SANTANDREU , EMILIO ANDRES SR.  
Address 5300 W 16 AVE, APT 319  
% EMILIO A. SANTANDREU  
EPWORTH VILLAGE  
City-State-Zip: HIALEAH FL 33012

*I hereby 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 all other like empowered.*

**SIGNATURE:** EMILIO A SANTANDREU

**DIRECTOR**

05/15/2020

Electronic Signature of Signing Officer/Director Detail

Date