

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
 05-03-2001 90995 015 ***150.00

DOCUMENT # 409797
 1. Entity Name
 Santo Tours & Travel Inc.

Principal Place of Business: 354 Cayuga Rd, Buffalo NY 14225
 Mailing Address: 5949 Sherry Lane #1900, Dallas TX 75225

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.

City & State: City & State

Zip: Zip Country: Country

4. FEI Number: 161139269
 Applied For: Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 CT Corporation Systems
 1200 S Pine Island Rd
 Plantation FL 33324

7. Name and Address of New Registered Agent
 Name:
 Street Address (P.O. Box Number is Not Acceptable):
 City: FL Zip Code:

8. 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President and CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sam Coats	
STREET ADDRESS	10726 Plano Rd	
CITY-ST-ZIP	Dallas TX 75238	
TITLE	CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Renee Foisy	
STREET ADDRESS	10726 Plano Rd	
CITY-ST-ZIP	Dallas TX 75238	
TITLE	COO	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Todd Johnson	
STREET ADDRESS	10726 Plano Rd	
CITY-ST-ZIP	Dallas TX 75238	
TITLE	Vice President - Info Systems	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Thomas Johnson	
STREET ADDRESS	10726 Plano Rd	
CITY-ST-ZIP	Dallas TX 75238	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby 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 report or supplemental report is true and accurate and 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Renee P. Foisy Date: 4/17/01 Daytime Phone #: 214-210-6104

CR2E034 (11/00)