


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 08:00 AM
Secretary of State


DOCUMENT # F00000002858
 1. Entity Name
SAUDI AMERICAN MINERALS, INC.



Principal Place of Business
 9900 W. SAMPLE ROAD, SUITE 300
 CORAL SPRINGS, FL 33065

Mailing Address
 676 W. PROSPECT ROAD
 FT. LAUDERDALE, FL 33309

DO NOT WRITE IN THIS SPACE



02172004 No Chg-P CR2E034 (10/03)

4. FEI Number 88-0377469	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLAIRE, ROBERT I
 7280 W. PALMETTO PARK ROAD, SUITE 106
 BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-issuing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOD GUTHRIE, DAVID 7636 TIMBER HILL NORTH DR INDIANAPOLIS, IN 46217
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MARCUS, JOEL 676 W PROSPECT RD FORT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LASNER, JAY 1030 CAROL RIDGE DR., #302 CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAKER, CARL 2020 BEAVER AVE., STE 204 MONACA, PA 15061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/05/04-80086-022 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David Guthrie*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/04 Date *954-571-1471* Daytime Phone #