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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

G04533

(7)

SAYOUR ENTERPRISES INC.					L ARRIGIO BRAN BRANCA MANGA MANGA MANGA		8 (8) 8 (8) 1 (8) (8 2)
Principal Plac	ce of Business	Mailing Address					Diğil biril biril içəl
13731 SW 152 STREET MIAMI FL 33177 US		•	13731 SW 152 STREET MIAMI FL 33177				
					3. Date Incorporated or Qualified 10/15/1982	3a. Date of Las 05/01/	•
1	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		59-2233447	\$8.	Not Applicable 75 Additional
22		27	¬ · · ·		5. Certificate of Status Desired	1 1	Be Required
City & Stat	te	City & State			6. Election Campaign Financing		.00 May Be
Ζ ιρ	Country	28	<u> </u>		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032,		
24]	25	29 30			Florida Statutes 📕 Yes 🗌 No		
	9. Name and Address of Cu	rrent Registered Agent	81 Na		10. Name and Address of New Re	egistered Agent	
043/01	I'M MINITERN			eme			
SAYOUR, RICHARD 13731 SW 152 STREET				82 Street Address (P.O. Box Number is Not Acceptable)			
	SW 132 STREET FL 33177		83			· · · · · · · · · · · · · · · · · · ·	
*****	The world		84 Cit			—. 85	Zip Code
				•		- FL ! !	· ·
or registe	ered agent, or both, in the State of I	Florida. Such change was authoriz	zed by the corporati	nd corporat on's board	tion submits this statement for the purp f of directors. I hereby accept the appo	i pose of changing it intment as registe	ts registered office red agent. I am
tamiliar w	vith, and accept the obligations of, S	Section 607.0505, Florida Statutes	S.			-	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (No	IOTE: Registered Agent signi	ature required v	when reinstating)	DATE	
12.	- 	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PTD	DELETE	1. 1 TITLE			Chang	ge 🔲 Addition
NAME exoter approprie	SAYOUR, RICHARD		1.2 NAME				
STREET ADDRESS CITY-ST-ZIP	13731 SW 152 STREET		1.3 STREET ADDR				
TITLE	VS	☐ DELETE	1.4 CITY-ST-ZIP 2 1 TITLE			Chang	ge Addition
NAME	SAYOUR, JEAN MARIE		2 2 NAME			-	,
STREET ADDRESS	•		2.3 STREET ADDR	ESS			
CITY - S1 - ZIP	MIAMI FL.		2 4 CITY - ST - ZIP				
TITLE		☐ DELETE	3 1 TITLE			☐ Chang	ge 🔲 Addition
NAME STREET ADDRESS			3 2 NAME	0100			
CHY-ST-ZIP			3 3. STREET ADDR 3 4 City-St-Zip				
TITLE		☐ DELETE	4.1 TITLE			Chang	ge 🔲 Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDR	iess			
CHTY-ST-ZIP	 		4.4 CITY-ST-ZIP				
TITLE		☐ DELETÉ	5. 1 TITLE			☐ Chang	ge 🔲 Addition
STREET ADDRESS			5.2 NAME	STOP			
CITY-ST-ZIP			5.3 STREET ADDR				
TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6. 1 TITLE			Chang	ge Addition
NAME			6.2 NAME				· _
STREET ADDRESS			6.3 STREET ADDR	ESS			
City-St-ZiP	<u> </u>		6 4 C(TY - ST - Z)P				
certify tha	at the information indicated on this a	annual recort or supplemental aon	oual report is true an	no accurate	the exemption stated in Section 119.0 and that my signature shall have the s	e taolia lenal ames	is if made under 🔝
oatn; that	t Lam an officer or director of the co in Block 12 or Block 13 if g hanged,	orporation or the receiver or truste	ee empowered to ex	ecute this r	report as required by Chapter 607, Flo.	rida Statutes; and	that my name
	Perlana	1 Dunal			1/3/1/21	6-120	1. 71/77
SIGNAT		ED OR PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR		45-4174 Datu	Daytime Prk	P-2417