2000 UNIFORM BUSINESS REPORT (UBR)

DOCÚMENT # L70918 S.A.A.R. MFG. CORP. Principal Place of Business Mailing Address 610 WEST 37TH STREET W 49TH ST HIALEAH FL 33012-5143 TALL FL 33012 2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Country

FERNANDEZ, MANUEL JR

9. This corporation is eligible to satisfy its Intangible

FERNANDEZ, MANUEL, JR.

FERNANDEZ, SILVIA M .

Tax filing requirement and elects to do so.

2665 W. 71ST PL

2665 W. 71ST PL

HIALEAH FL

HIALEAH FL

(See criteria on back)

2665 W. 71ST PLACE HIALEAH FL 33016

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

City & State

Zip

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIE

CITY-ST-ZIP

Suite, Apt. #, etc.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

TITLE

NAME

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NAME STREET ADDRESS

NAME

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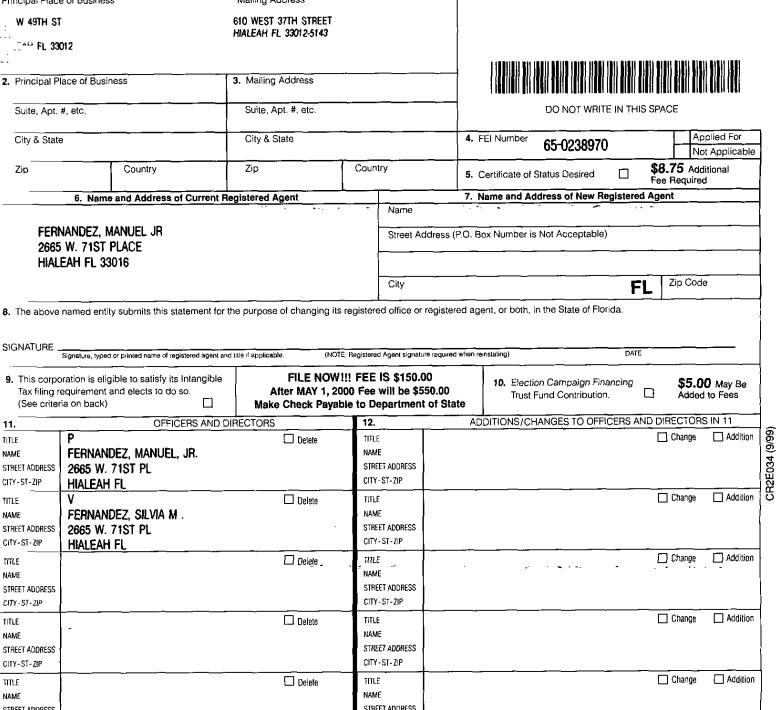
Name

City

City & State

FILED May 03, 2000 8:00 am Secretary of State

05-03-2000 90012 002 ***150.00



Change Change

Addition

CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 out all other like empowered.

STREET ADDRESS

Manuel Fernandez, Jr. 4/22/00 (305) SIGNATURE YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR