


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 04, 2003 8:00 am**  
**Secretary of State**

09-04-2003 90066 024 \*\*\*158.75

0134920 AT

<b>DOCUMENT #</b> P02000047174	
<b>1. Entity Name</b> SAF ENTERPRISES, INC.	

<b>Principal Place of Business</b> 3450 PALENCIA DRIVE 1310 TAMPA FL 33618	<b>Mailing Address</b> P O BOX 272154 TAMPA FL 33688
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<b>2. Principal Place of Business</b> 4305 Claverton Court Suite, Apt. #, etc.	<b>3. Mailing Address</b> P.O. Box 272154 Suite, Apt. #, etc.
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<b>City &amp; State</b> Tampa, FL	<b>City &amp; State</b> Tampa, FL
<b>Zip</b> 33624	<b>Zip</b> 33688
<b>Country</b> USA	<b>Country</b> USA

<b>4. FEI Number</b> 33-1001316	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	



☒ CHECK HERE IF MAKING CHANGES

<b>6. Name and Address of Current Registered Agent</b> HEIM, SUSAN L 3450 PALENCIA DRIVE 1310 TAMPA FL 33618	
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<b>7. Name and Address of New Registered Agent</b>	
Name: same	
Street Address (P.O. Box Number is Not Acceptable): 4305 Claverton Court	
City: Tampa	FL Zip Code: 33624

<b>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.</b>	
SIGNATURE: <i>Susan Heim</i> - vice president	DATE: 8/28/03

<b>FILE NOW!!! FEE IS \$550.00</b> After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P DEFRANCISCO, ANTHONY J 3450 PALENCIA DRIVE #1310 TAMPA FL 33618	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
V HEIM, SUSAN L 3450 PALENCIA DRIVE #1310 TAMPA FL 33618	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VICE-PRESIDENT - V Anthony DeFrancisco 4305 Claverton Court Tampa, FL 33624	TITLES
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PRESIDENT - P SUSAN HEIM 4305 Claverton Court Tampa, FL 33624	TITLES
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**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.**

<b>SIGNATURE:</b> <i>Susan Heim</i>	<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b> SUSAN L. HEIM	<b>Date</b> 8/28/03	<b>Daytime Phone #</b> (813) 478-4677
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CR2E034 (4/03)

Attachment

80143777

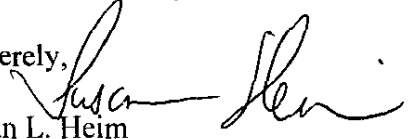
PO2000047174

August 28, 2003

To Whom It May Concern:

My name is Susan L. Heim and I am vice-president of SAF Enterprises, Inc. I am writing to notify the state that we did not receive a prior notice of a filing fee being due. I am not sure if it is because we are in our first year of business or a mailing error. I honestly didn't even know it was due. Please accept payment of the original \$150.00 filing fee and take note of our address change as well so hopefully this does not happen in the future. Thank you so much.

Sincerely,

  
Susan L. Heim  
SAF Enterprises, Inc.  
(813)478-4678