FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P9500067041 (0)

S A S ELECTRONICS, INC.

Principal Place of Business	Mailing Address
4995 NW 72 AVE SUITE 102	4995 NW 72 AVE SHITE 102

FILED May 11 1998 8:00am Secretary of State



Principal Place	e of Business		Mailing Addres	S						
	AVE SUITE 102		4995 NW 72 A		2					
MIAMI FL 331	166		MIAMI FL 3316	56			DO NOT MOTE IN THE OF	2405		
							DO NOT WRITE IN THIS SE	ACE		
							3. Date Incorporated or Qualified			
9 Principal P	lace of Busines		20 Mailing Ada				08/30/1995			
	IACE OF BUSINES	8	2a. Mailing Add	ress			4. FEI Number		pplied For	
21 Suita Ant	# oto		26	4 -1-			65-0604572		ot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional	
22 City & State			City & State						equired	
23]	-		h				6. Election Campaign Financing		May Be	
Zip		Country	Zip	····	Country		Trust Fund Contribution		to Fees	
24		l	— `		Country	•	8. This corporation owes or has paid the curre			
24	9. Name and Address of Current Registered Agent									
VI i		O NOOISES OF COLLECT	r negisteren Agent		81	Name	10. Name and Address of New Registered Ag	jent		
	IGER, SAM	P1 11 14			*'	Name				
	85 NW 72 AV	ENUE			82	Street A	Address (P.O. Box Number is Not Acceptable)		· · · · · · · · · · · · · · · · · · ·	
	ITE 102					ļ				
MI	AMI FL 33166				83		•		·	
					84	City		85 Zip	Code	
					"	Ony	FL i	63 Lib	Coue	
11. Pursuant t	to the provision:	s of Sections 607.0502	2 and 607.1508, Flor	ida Statutes,	the above	a-named o	corporation submits this statement for the purpose of c	hanging i	ts registered	
office or re	egistered agent m familiar with.	, or both, in the State and accept the obliga	of Florida, Such chai itions of Section 607	nge was auth 1.0505. Florid	orized by a Statutes	the corp	oration's board of directors. I hereby accept the appoint	ntment as	registered	
SIGNATURE				.0000, 110110	a olululoi					
	Signature, typed or p	rinted name of regulered ages	nt and title if applicable	(NOTE Re	egistered Age	nt signature r	required when reinstating) DATE			
12.		OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTOR	3S IN 12	
TITLE	D			ELETE	11 TITLE			Change	☐ Addition	
NAME	KLIGER, S	AM			1.2 NAME	- 1				
STREET ADDRESS	4995 NW 7	72 AVENUE #102			1.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL				1.4 CiTY-S	1				
TITLE				ELETE	2.1 TITLE	1-211		Change	Addition	
NAME			— -		2.2 NAME		_	The Country of		
STREET ADDRESS						ADDOCCO				
					2.3 STREET					
CITY-ST-ZIP TITLE			П п	ELETE	2. 4 CITY - S	ST-ZIP		Tohana	Addition	
1			ں ت	יבננוג	3.1 TITLE	i	L	Change	L_J Addition	
NAME					3.2 NAME					
STREET ADDRESS					3.3 STREET	ADDRESS				
CITY-ST-ZIP			··· ··· · · · · · · · · · · · · · · ·		3.4. CITY-S	T-21P				
TITLE			□ D	ELETE	4.1 TITLE			Change	☐ Addition	
NAME					4. 2 NAME					
STREET ADDRESS					4.3 STREET	ADDRESS				
CITY-ST-ZIP					4.4 DITY-S	T-ZIP				
TITLE			□ D	ELETE	5.1 TITLE			Change	☐ Addition	
NAME					5.2 NAME	- 1			ŀ	
STREET ADDRESS					5.3 STREET	ADDRESS				
CITY-ST-ZIP					5.4 CITY-ST]	
TITLE		·	D	ELETE	6.1 TITLE			Change	Addition	
NAME					6.2 NAME		-			
STREET ADDRESS				_	6.3 STREET	ADDDCCC	•			
			1		7		•			
14. I hereby ca	ertify that the in	formation supplied will	th this filing does not	quality for the	6.4 CITY-ST	ion states	d in Section 119.07(3)(i), Florida Statutes. I further certif	futher the	Information	
Indicated o	on this annual r	eport or supplemental	prinual report to true	and accurat	te and the	at my sign	ature shall have the same legal effect as if made under required by Chapter 607, Florida Statutes; and that my	y mai me or oath; the	at I am an	
officer or o	firector of the co	orporation or the recei	iver or trusted empoy	rered to exec	cute,this r	eport as r	required by Chapter 607, Florida Statutes; and that my	name apr	pears in	