

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V06094** (9)

1. Corporation Name: **SADEYA INTERNATIONAL, INC.**



Principal Place of Business: **3101 PORT ROYALE BLVD SUITE 223 FT LAUDERDALE FL 33308**
 Mailing Address: **3101 PORT ROYALE BLVD SUITE 223 FT LAUDERDALE FL 33308**

2. Principal Place of Business: **21 2020 NE 62nd CT. Suite, Apt #, etc.**
22 FT. LAUDERDALE, FLORIDA
23 33308 **24 BROWARD**
 2a. Mailing Address: **26 2020 NE 62nd CT. Suite, Apt #, etc.**
27 FT. LAUDERDALE, FLORIDA
28 33308 **29 BROWARD** **30**

3. Date Incorporated or Qualified: **01/13/1992** 3a. Date of Last Report: **06/15/1995**
 4. FEI Number: **65-0384465** Applied For: Not Applicable:
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No
 10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent: **WESTON, TOD ANDREW PA 6350 N ANDREWS AVE SUITE 300 FT LAUDERDALE FL 33309**

81 Name: _____
 82 Street Address (P.O. Box Number is Not Acceptable): _____
 83 _____
 84 City: _____ **FL** 85 Zip Code: _____

11. Pursued to the provisions of Sections 607.0909 and 607.1509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0909, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

1	D SADEYA, SAUD K	<input type="checkbox"/> DELETE
2	3101 PORT ROYALE BLVD	
3	FT LAUDERDALE FL	<input type="checkbox"/> DELETE
4		
5		<input type="checkbox"/> DELETE
6		
7		<input type="checkbox"/> DELETE
8		
9		<input type="checkbox"/> DELETE
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11		<input type="checkbox"/> DELETE
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13		<input type="checkbox"/> DELETE
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15		<input type="checkbox"/> DELETE
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17		<input type="checkbox"/> DELETE
18		
19		<input type="checkbox"/> DELETE
20		

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2	12 NAME	
3	13 STREET ADDRESS	2020 NE 62nd CT.
4	14 CITY, STATE	FT. LAUDERDALE, FL 33308
5	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6	22 NAME	
7	23 STREET ADDRESS	
8	24 CITY, STATE	
9	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10	32 NAME	
11	33 STREET ADDRESS	
12	34 CITY, STATE	
13	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14	42 NAME	
15	43 STREET ADDRESS	
16	44 CITY, STATE	
17	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18	52 NAME	
19	53 STREET ADDRESS	
20	54 CITY, STATE	
21	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22	62 NAME	
23	63 STREET ADDRESS	
24	64 CITY, STATE	

14. I hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this general report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registrar or trustee, empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or each attachment with an address.

SIGNATURE: *[Signature]* SAUD SADEYA 1/31/96 (305) 938-8323
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)