FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:56

DOCUMENT # K22547 (9)

1. Corporation Name
SASS ENTERPRISES, INC.

Principal Place of Business	Mailing Address
5105 SOUTH TRASK STREET TAMPA FL 33611	5105 SOUTH TRASK STREET TAMPA FL 33611

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/02/1968
3a. Date of Last Report: 04/11/1994

2. Principal Place of Business	2a. Mailing Address
21 919 Greenbelt Circle	26 919 Greenbelt Circle
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23 Brandon, FL	City & State 28 Brandon, FL
Zip / County 24 33510 / 25 Hillsborough	Zip / County 29 33510 / 30 Hillsborough

4. FEI Number: 59-2687789 ☐ 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

9. Name and Address of Current Registered Agent

SASS, JOSEPH S.
5105 SOUTH TRASK STREET
TAMPA FL 33611

10. Name and Address of New Registered Agent

01 Name: Sass, Charles P.
02 Street Address (P.O. Box Number is Not Acceptable): 919 Greenbelt Circle
03
04 City: Brandon, FL 85 Zip Code: 33510

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Charles P. Sass (Charles P. Sass PD) DATE: 6/27/95
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
NAME	SASS, JOSEPH S.	12 NAME	Sass, Charles P.	
STREET ADDRESS	5105 S. TRASK STREET	13 STREET ADDRESS	919 Greenbelt Circle	
CITY ST ZIP	TAMPA FL	14 CITY ST ZIP	Brandon, FL 33510	
TITLE	STD	21 TITLE	DTS	☒ Change ☐ Addition
NAME	SASS, ANITA G.	22 NAME	Sass, Patricia A.	
STREET ADDRESS	5105 S. TRASK STREET	23 STREET ADDRESS	919 Greenbelt Circle	
CITY ST ZIP	TAMPA FL	24 CITY ST ZIP	Brandon, FL 33510	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I (We) hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 with changes, or on an attachment with an address.

SIGNATURE: Charles P. Sass President/Director 6/6/95 (813) 684-1344
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

Charles P. Sass President/Director 6/6/95 (813) 684-1344