

Sep 01, 2004 8:00 am
Secretary of State

09-01-2004 90005 001 ***158.75

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000040054 1. Entity Name SAPA TRANSMISSION, INC.					
Principal Place of Business % RJS, 1500 MIAMI CENTER 201 SOUTH BISCAYNE BLVD. MIAMI, FL 33131			Mailing Address % RJS, 1500 MIAMI CENTER 201 SOUTH BISCAYNE BLVD. MIAMI, FL 33131		
2. Principal Place of Business 2455 E. SUNRISE BLVD		3. Mailing Address 2455 E. SUNRISE BLVD			
Suite, Apt. #, etc. 510		Suite, Apt. #, etc. 510			
City & State FT LAUDERDALE		City & State FT LAUDERDALE		4. FEI Number 050566879	
Zip 33304		Country BROWARD		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION COMPANY OF MIAMI % RJS, 1500 MIAMI CENTER 201 SOUTH BISCAYNE BLVD. MIAMI, FL 33131		7. Name and Address of New Registered Agent Name DENIZ BALTA Street Address (P.O. Box Number is Not Acceptable) 2455 E. SUNRISE BLVD SUITE 510 City FT LAUDERDALE FL Zip Code 33304			
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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete APERIBAY, IBON 201 SO. BISCAYNE BLVD. 1500 MIAMI CENTER MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition APERIBAY, IBON 2455 E. SUNRISE BLVD SUITE 510 FT LAUDERDALE FL 33304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete APERIBAY, JOKIN 201 SO. BISCAYNE BLVD. 1500 MIAMI CENTER MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition APERIBAY, JOKIN 2455 E. SUNRISE BLVD SUITE 510 FT LAUDERDALE FL 33304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete APERIBAY, JOAQUIN 201 SO. BISCAYNE BLVD. 1500 MIAMI CENTER MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition APERIBAY, JOAQUIN 2455 E. SUNRISE BLVD SUITE 510 FT LAUDERDALE FL 33304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Change ☒ Addition BALTA, DENIZ 2455 E. SUNRISE BLVD SUITE 510 FT LAUDERDALE FL 33304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 an other like empowered.					
SIGNATURE:			8-28-04 9546080125 Date Daytime Phone #		