

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000044995

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**Entity Name:** SAI ADVISORS INC.

**Current Principal Place of Business:**

450 EAST LAS OLAS BLVD  
SUITE 730  
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

450 EAST LAS OLAS BLVD  
SUITE 730  
FT. LAUDERDALE, FL 33301

**New Mailing Address:**

**FEI Number:** 68-0678326

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

M.J.F. REGISTERED AGENT CORP.  
153 SEVILLA AVENUE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SARRIA-DIAZ, RAFAEL A  
Address: 153 SEVILLA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: GARZA, ALBINO F  
Address: 153 SEVILLA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: HOLDER, FRANK L  
Address: 450 EAST LAS OLAS BLVD, SUITE 730  
City-St-Zip: FT. LAUDERDALE, FL 33301

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RAFAEL SARRIA

MR.

02/26/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date