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Apr 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 682546

(7)

1. Corporation Name  
S.A.S. INVESTMENTS, INC.



Principal Place of Business

Mailing Address

~~2050 NEW CUT RD~~  
~~SPARTANBURG SC 29303~~

3116 N. Fed Hwy  
Lighthouse Pt, FL  
33064

~~7750 B GREENVILLE HWY.~~  
~~SPARTANBURG SC 29301-2500~~

2. Principal Place of Business

2a. Mailing Address

21 3116 N. FEDERAL Hwy

26 SAME

22 #370

27 Suite, Apt. #, etc.

23 City & State Lighthouse Point

28 City & State

24 Zip 33064

25 Country BROWARD

29 Zip

30 Country

3. Date Incorporated or Qualified  
09/10/1980

3a. Date of Last Report  
03/14/1996

4. FEI Number  
59-2024763

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

10. Name and Address of New Registered Agent

LINDGREN, KEITH  
105 N.E. 183RD ST.  
MIAMI FL 33179

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT  
NAME CIACELLI, FRED N  
STREET ADDRESS 3410 LEIGH ROAD  
CITY-ST-ZIP POMPANO BEACH FL

1.1 TITLE ☐ Change ☐ Addition

TITLE DIRECTOR  
NAME BARBARA M. Ciacelli  
STREET ADDRESS 507 W. WICHAMUR LN  
CITY-ST-ZIP SPARTANBURG, SC 29301

2.1 TITLE ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included 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 if changed, or on an attachment with an address.

SIGNATURE:

*Greg M. Ciacelli*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-20-97

1-888-614-4599

Date

Daytime Phone #

0010718

CR2E034 (9/96)