

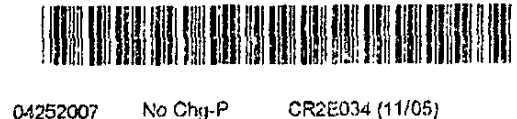
**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 08:00 AM
Secretary of State

DOCUMENT # G08541 1. Entry Name SAI-R, INC.	
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Principal Place of Business % SUNSHINE PROFESSIONAL DRY CLEANERS 6734 UNIVERSITY DR. TAMARAC, FL 33321	Mailing Address % SUNSHINE PROFESSIONAL DRY CLEANERS 6734 UNIVERSITY DR. TAMARAC, FL 33321
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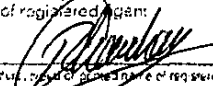
DO NOT WRITE IN THIS SPACE



4. FEI Number 59-2236845	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CHAUHAN, RAJENDRA 6734 NORTH UNIVERSITY DRIVE TAMARAC, FL 33321	DO NOT WRITE IN THIS SPACE
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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:  DATE: 4/27/07

Signature, name and address of registered agent and fee if applicable. (NOTE: Registered agent signature required when changing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P CHAUHAN, RAJENDRA 8849 NW 55TH PLACE CORAL SPRINGS, FL 00000,
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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05/23/07-80001-019 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, 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 207, Florida Statutes; and that my name appears in Block 10 or Block 11 of this report or an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 4/27/07. 954-722-9280

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR