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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (5)SABOFI INVESTMENTS CORPORATION Mailing Address Principal Place of Business 1709 S. BABCOCK ST. 1709 S. BABCOCK ST. MELBOURNE FL 32901 MELBOURNE FL 32901 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/10/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2340149 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 1 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζip Country Zìo Country 8. This corporation owes or has paid the current year Intangible Yes 25 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KRIEGSMAN, HARVEY A. 1212 CIMARRON CIR NE Street Address (P.O. Box Number is Not Acceptable) PALM BAY FL 32905 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change TITLE 1.1 TITLE KRIEGSMAN, HARVEY A. NAME 1.2 NAME 1212 CIMARRON CIR NE STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL 32905 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change ☐ Addition KRIEGSMAN, DENISE C. NAME 2.2 NAME 1212 CIMARRON CIR NE STREET ADDRESS 2.3 STREET ADDRESS PALM BAY FL 32905 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE KRIEGSMAN, STEFAN J NAME 3.2 NAME 1355 CROMEY RD. 3.3 STREET ADDRESS STREET ADDRESS PALM BAY FL 32905 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE KRIEGSMAN, DEAN A NAME 4. 2 NAME 2108 SHELTER DR. 4.3 STREET ADDRESS STREET ADDRESS PORT ST. LUCIE FL 4.4 CITY - ST - ZIP CITY-ST-ZIF DELETE Addition 5 I TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition 6.1 TITLE 6.2 NAME NAME STREET ADORESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I 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 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 officer or director of the corporation or the receiver or trustee en nowered to Block 12 or Block 13 if charged, on an attachment of an address.

SIGNATURE:

FILED

Jan 20 1998 8:00am