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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name



J38597

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 10, 1999 8:00 am Secretary of State

05-10-1999 90073 040 ***150.00

SAWGRA	ASS MINING COMPANY, IN	C.							
Principal Place	e of Business	Mailing Address					TI SHALL ALANC BE		1841 Albir Binti ISAI
•		6296 OLD WATEROAK	ROAD						
			TALLAHASSEE FL 32312						
US						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						10/20/1986			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		L	Applied For
21	<u> </u>	26				65-0011044			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	5. Certificate of Status Desired \$8.75 Additional		
22		27							Required
City & State	e	City & State	City & State			6. Election Campaign Financing			00 May Be
23		28				Trust Fund Contribution			ed to Fees
Zip	Country	Zip	F	untry		8. This corporation owes the curre			□No
24		29	30	1		Personal Property Tax.		☐ Yes	L_1/10
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New R	egistered A	gent	
CDE	EN, ROBERT M.			"	Hallie				
	OLD WATEROAK ROAD			82	Street Addr	ress (P.O. Box Number is Not Accepta	ble)		
	LAHASSEE FL 32312								
IALL	LANASSEE FL 32312			83					
				84	City	-		85	Zip Code
				1 !	•		FL	1 1	
office or r	edistored egent or both in the State.	of Florida. Such change wa	s authorized	d by th	named corp ne corporati	poration submits this statement for the ion's board of directors. I hereby accept	purpose of o	hanging tment a	j its registered s registered
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State m familiar with, and accept the obligations of the state	of Florida. Such change wa tions of, Section 607.0505,	s authorized Florida Stat	d by th tutes.	ne corporati	poration submits this statement for the ton's board of directors. I hereby accepted when reinstating)	purpose of o t the appoin	hanging tment a	g its registered s registered
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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 Block 12 or Block 13 if changed, or on an attachment with an address, with all otherwise empowered.

SIGNATURE:

G OFFICER OR DIRECTOR