

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 30 AM 9:56

DOCUMENT # **K22547**

(9)

1. Corporation Name

SASS ENTERPRISES, INC.

Principal Place of Business

**5105 SOUTH TRASK STREET
TAMPA FL 33611**

Mailing Address

**5105 SOUTH TRASK STREET
TAMPA FL 33611**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/02/1988

3a. Date of Last Report

04/11/1994

4. FEI Number

59-2887789

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**

7. This corporation has liability for intangible tax under S. 190.012

Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 919 Greenbelt Circle

2a. Mailing Address

28 919 Greenbelt Circle

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

23 Brandon, FL

City & State

28 Brandon, FL

Zip

24 33510

Country

25 Hillsborough

Zip

29 33510

Country

30 Hillsborough

9. Name and Address of Current Registered Agent

**SASS, JOSEPH S.
5105 SOUTH TRASK STREET
TAMPA FL 33611**

10. Name and Address of New Registered Agent

01 Name

SASS, Charles P.

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

919 Greenbelt Circle

03

04 City

Brandon,

FL

05 Zip Code

33510

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, all the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Charles P. Sass

(Charles P. Sass, PD)

6/27/95

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SASS, JOSEPH S.
STREET ADDRESS	5105 S. TRASK STREET
CITY, ST, ZIP	TAMPA FL
TITLE	STD
NAME	SASS, ANITA G.
STREET ADDRESS	5105 S. TRASK STREET
CITY, ST, ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	SASS, Charles P.	
1.3 STREET ADDRESS	919 Greenbelt Circle	
1.4 CITY, ST, ZIP	Brandon, FL 33510	
2.1 TITLE	DTS	☒ Change ☐ Addition
2.2 NAME	SASS, Patricia A.	
2.3 STREET ADDRESS	919 Greenbelt Circle	
2.4 CITY, ST, ZIP	Brandon, FL 33510	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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, changed or corrected in accordance with the above.

SIGNATURE: *Charles P. Sass President/Director*

CHARLES P. SASS President/Director

6/6/95 (813) 684-1344

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