## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
Jan 20, 2006 08:00 AN
Secretary of State

DOCUMENT # L03000017761

1. Entity Name SAS GROUP, LLC



Principal Place of Business

3617 HUDSON LANE TAMPA, FL 33618 Mailing Address 3617 HUDSON LANE TAMPA, FL 33618



01132006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 74-3092704 Applied For Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

SOCIAS, FERNANDO 3617 HUDSON LANE TAMPA, FL 33618

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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.

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

(NOTE, Registered Agent signature required when reinstating)

DATE

## Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALVAREZ, ROBERT G 3617 HUDSON LANE TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-S1-ZIP	T SOCIAS, FERNANDO 3617 HUDSON LANE TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOCIAS, ALEJANDRO 3617 HUDSON LANE TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY ST-ZIP	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Face 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Fernando Socias

1/16/06 (813) 969-3033

Date

Daytime Phone #