


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90082 040 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L19639					
1. Corporation Name SADDLE CREEK ASSOCIATES, INC.					
Principal Place of Business ONE FINANCIAL PLAZA, STE 2626 FT LAUDERDALE FL 33394 US			Mailing Address ONE FINANCIAL PLAZA, STE 2626 FT LAUDERDALE FL 33394 US		
2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified	
21		26		09/28/1989	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0188649	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		30		8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25		31		Trust Fund Contribution	
26		32		5.00 May Be Added to Fees	
27		33		8. This corporation owes the current year Intangible	
28		34		Personal Property Tax.	
29		35		9. Name and Address of Current Registered Agent	
30		36		10. Name and Address of New Registered Agent	
31		37		81 Name	
32		38		82 Street Address (P.O. Box Number is Not Acceptable)	
33		39		83	
34		40		84 City	
35		41		85 Zip Code	
36		42		FL	
37		43		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.	
38		44		SIGNATURE	
39		45		Signature, typed or printed name of registered agent and title if applicable.	
40		46		(NOTE: Registered Agent signature required when reinstating)	
41		47		DATE	
42		48		12. OFFICERS AND DIRECTORS	
43		49		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
44		50		1.1 TITLE	
45		51		P/S	
46		52		1.2 NAME	
47		53		Steiner, Jeffrey S.	
48		54		1.3 STREET ADDRESS	
49		55		2201 NW 30th Place, Ste A	
50		56		1.4 CITY-ST-ZIP	
51		57		Pompano Beach, FL	
52		58		2.1 TITLE	
53		59		2.2 NAME	
54		60		2.3 STREET ADDRESS	
55		61		2.4 CITY-ST-ZIP	
56		62		3.1 TITLE	
57		63		3.2 NAME	
58		64		3.3 STREET ADDRESS	
59		65		3.4 CITY-ST-ZIP	
60		66		4.1 TITLE	
61		67		4.2 NAME	
62		68		4.3 STREET ADDRESS	
63		69		4.4 CITY-ST-ZIP	
64		70		5.1 TITLE	
65		71		5.2 NAME	
66		72		5.3 STREET ADDRESS	
67		73		5.4 CITY-ST-ZIP	
68		74		6.1 TITLE	
69		75		6.2 NAME	
70		76		6.3 STREET ADDRESS	
71		77		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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/99 954/523-2626

Date

Daytime Phone #

CR2E034 (11/98)