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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 28 1997 8:00am

Secretary of State

2-14-97 941-642-7101

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L91709

(0)

SARAN DESIGN GROUP, INC.

| Principal Place | o of Rusinose | Mailing Add | Mailing Address | | | | | I IBBARNI BIB IBRAI FREM ARRIG BEING IBN BIRNA DIRNI BERAH BURNI BURNI BURNI BURNI BERA | | | | |
|--|-----------------------------|----------------------------|---|------------------|-----------------|--|-----------------------------|---|-------------|--------------|--|--|
| Principal Place of Business | | | ** | | | | | ł | 1 | | | |
| 1104 N COLLIER BLVD MARCO ISLAND FL_33997 | | | 1104 N COLLIER BLVD MARCO ISLAND FL 34145-2547 | | | | | | | | | |
| | | | | | | | | 3. Date Incorporated or Qualified | 3a. Da | ate of Last | Report | |
| | | | | | | | | 08/03/1990 | 06/ | 06/1996 | <u>; </u> | |
| | lace of Business | | 2a. Mailing A | \ddress | | | | 4. FEI Number | | | Applied For | |
| 21 | # -1- | | 26 | | | | | 65-0212652 | | | Not Applicable | |
| Suite, Apt. | #, €1C | | Suite, Ap | ы. #, екс. | | | | 5. Certificate of Status Desired | | | Additional Required | |
| City & State | 0 | City & State | | | | | Election Campaign Financing | | | O May Be | | |
| 23 | | | 28 | | | | | Trust Fund Contribution | | | d to Fees | |
| Z(p) | . Co | ountry | Zip | | Cour | ntry | | 8. This corporation has liability for | intangible | | | |
| 24 3414 | [25] | | 29 | | 30 | | | Florida Statutes | ☐ Yes [| No | | |
| | | ddress of Current | Registered Age | ent | | | | 10. Name and Address of New R | egistered | Agent | | |
| SARAN, STAN | | | | | | 61 | Name | | | | | |
| 9 FRONT STREET | | | | | ħ | 82 Street Address (P.O. Box Number is Not Acceptable | | | | | *************************************** | |
| MAP | RCO ISLAND FL 3 | 33937 | | | - | 83 | | | | | , | |
| | | | | | | 63 | | | | | | |
| | | | | | | 84 | City | | £21 | 85 Zij | p Code | |
| 44.5 | 12 (1 0 0 0 0 0 0 0 0 0 0 0 | Continu (07 05 00 | 1 cond CO7 1500 1 | Florida Ctatuta | o the eb | | namad | correction submits this statement for the | FL | <u> </u> | s ito conintered | |
| office or r | egistered agent, or | both, in the State of | of Florida, Such c | change was a | uthorized | by | the corp | corporation submits this statement for the poration's board of directors. I hereby according to the control of the corporation | politiose o | pointment a | as registered | |
| | m familiar with, and | accept the obliga | uons of, Section (| 607.0505, Flo | nda Stati | utes | l. | | | | | |
| SIGNATURE | Signature typing or princes | dinanic of registered agen | t and title if applicable | (NOTE | Registered | Ager | nt signature | required when reinstating) | DATE | | ****** | |
| 12. | | OFFICERS AND | | ` | 13. | | | ADDITIONS/CHANGES TO OFF | CERS AND | DIRECTO | ORS IN 12 | |
| TITLE | PD | | | DELETE | 1,1 ไป | LE | | | | Change | e Addition | |
| NAM'É | SARAN, STAN | | | | 1.2 NA | ME | | | | | | |
| STREET ADDRESS | 9 FRONT ST | | | | 1.3 STF | REET . | ADDRESS | | | | | |
| CITY-S1-ZIP | MARCO ISLAN | D FL | | | 1.4 CIT | Y-51 | T-ZIP | | | _ purp | | |
| THILE | | | L. | DELETE | 2.1 TIT | LE | | | | L Change | e L. Addition | |
| NAME | | | | | 2.2 NA | ME | | | | | | |
| STREET ADDRESS | | | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | | | - | DELETE | 2. 4 CI | | ST - ZIP | | | ☐ Change | e 🔲 Addition | |
| TITLE | | | _ | ☐ Derest | 3.1 TIT | | | | | L.J Change | s Addition | |
| NAME STREET ADDRESS | | | | | 3.2 NA | | ADDRESS | | | | | |
| | | | | | 3.3 ST | | | | | | | |
| City-St-Zip Title | | | <u>T</u> | DELETE | 4.1 TIT | | 51-217 | | | Change | e | |
| NAME | | | • | | 4.2 NA | | | | | | - - " | |
| STREET ADDRESS | | | | | 4.3 ST | REET | ADDRESS | | | | | |
| CITY'- ST- ZIP | | | | | 4.4 CIT | | | | | | | |
| TITLE | | | | DELETE | 5.1 TIT | LE | | | | Change | e Addition | |
| NAME | | | | | 5.2 NA | ME | | | | | | |
| STREET ADDRESS | | | | | 5.3 ST | REET. | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | 5.4 CIT | | T-ZIP | | | | | |
| TITEE | | | L | DELETE | 6.1 T (T | | | | | L Change | e L. Addition | |
| NAME | | | | | 6.2 NA | | | | | | | |
| STREET ADORESS | | | | | | | ADDRESS | | | | | |
| CITY-ST-2IP | by cortify that the in | damation supplied | with this bline d | ope not quelif | 6.4 CIT | | | tated in Section 119.07(3)(i), Florida Statu | es I furthe | r certify th | nat the | |
| informatic | on indicated on this | annual report or si | upplemental anni | ual report is tr | ue and a | iccu | urate and | I that my signature shall have the same leg | al effect a | s if made (| under oath; that | |
| i am an d | micer or director of | the corporation or | THE LECEINEL OF IL | ustee empow | ereo to e | xec | ute this i | report as required by Chapter 607, Florida | SIBIUIES; 2 | ma mai m | y name | |