

FILE NOW: Fee after May 1, will be \$588.75

APPROVED
AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company SAAM'S PROPERTIES, L.C. 14285 AIRLINE HIGHWAY BATON ROUGE LA 70817		DOCUMENT # J,95000000340	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.		1a. Principal Place of Business Address 14285 AIRLINE HIGHWAY BATON ROUGE LA 70817	
2. Principal Place of Business SAME	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	3. Date Organized or Qualified 05/03/1995	3a. State of Formation FL
4. FEI Number 59-3318592		☐ Applied For ☐ Not Applicable	
5. Date of Last Report 03/05/1996		6. Certificate of Status Desired ☒ Additional Fee Required	
7. Name and Address of Current Registered Agent MCGILL, ROBERT E III 743 HIGHWAY 98 EAST, SUITE 5 DESTIN FL 32541		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)		DATE _____	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	SACHDEV, MEENA G	334 EAST WOODSTONE COURT	BATON ROUGE LA
			600002142886--1 -04/14/97--01182--015 ****203.75 ****203.75 <i>G. Allen</i> 4/10/97
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (l), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.			
SIGNATURE: <i>Meena G Sachdev</i>		4/7/97	504-766-4129
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER			