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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L95762

(5)

SANAB INTERNATIONAL CORP.

FILED
Apr 30 1997 8:00am
Secretary of State

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Principal Prace of Business	incipal Prace of Business Mailing Address		F CRANION AND TAKES CIRK TABLE AND AND AND AND SEALS BIRTY DIRTY DIRTY DIRTY CORN	
100 SE SECOND STREET	100 SE SECOND STREET	ſ		
17TH FLOOR MIAMI FL 33131-1101	17TH FLOOR			
US	MIAMI FL 33131-2100 US		3. Date Incorporated or Qualified 08/24/1990	3a, Date of Last Report 05/01/1996
Principal Place of Business 1	2a. Mailing Address 26	Handidd and the same of the sa	4. FEI Number 65-0223230	Applied For Not Applicable
Suite, Apt #, etc	Suite, Apt. #, etc.	-	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for in	
24 25	29	30		Yes K No
9, Name and Address of C	urrent Registered Agent		10. Name and Address of New Reg	latered Agent
FRIEDHOFF, JOHN H.		81 Name		
100 SE SECOND STREET		82 Street Ad	dress (P.O. Box Number is Not Acceptabl	e)
17 FLOOR				
MIAMI FL 33131		B3		
		84 City	110 110 110 110 110 110 110 110 110 110	85 Zip Code
- TF 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
 Pursuant to the provisions of Sections 60 office or registered agent, or both in the 	7.0502 and 607.1508, Florida Statu State of Florida, Such change was	ites, the above-named co	rporation submits this statement for the pu	rpose of changing its registered
agent I am familiar with, and accept the	obligations of, Section 607.0505, F	lorida Statutes.	anon's board or directors. Thereby accept	. the appointment as registered
SIGNATURE				
Signature types or proved have of register		TE Registered Agent signature req		DATE
THE D	S AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	
LWANIA AA A	L Detere	1.1 TITLE		Change Addition
AND OF OFFICE	17TH ELOOP	1.2 NAME		
MANUEL 00404 4404	17 III / LOOK	1.3 STREET ADDRESS		
	DELETE	1.4 CITY-ST-ZIP		
ISANA AA	☐ DELETE	2 1 TITLE		Change Addition
400 OF OFFICER	17TH ELOOD	2.2 NAME		
MANN EL 00404 4404	ITIN FLOOR	2 3 STREET ADDRESS		
	The state	2 4 CITY-ST-ZIP		
011110 00	DELETE	3 1 TITLE		Change Addition
400 OF OFOCHIN OTOFFT	17TH ELOOD	3 2 NAME		·
BRIGHT MAINT 1404	I/In FLOOR	3 3 STREET ADDRESS		
	- Delete	3.4. CITY-ST-ZIP		
AHWA WA	DELETE.	4.1 TITLE		Change Addition
AND OF OFGOLID OFFICE	17TH EI AAD	4. 2 NAME		
MALIE 00404 4404	I/ III FLOON	4.3 STREET ADDRESS		
CITY-ST ZIP MIAMI FL 33131-1101	T DECESS	4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAMI		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
C(1) - S1 - Z(P)	I laster	5.4 CITY - ST - ZIP	***************************************	
THE	DELETE	61 TITLE		☐ Change ☐ Addition
NAVE		6.2 NAME		
STREET AUGHESS		6.3 STREET ADDRESS	•	
CHY - ST - 74P		6 4 CITY-ST-ZIP		

I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March, 26, 8+- 561- 3956737