

# FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Martinez  
GOVERNOR  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

DOCUMENT # **M77957**

(2)

95 MAY -1 PM 2:28

SAI DISTRIBUTORS, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

% PETER BESHOURI  
1901 TIGERTAIL BLVD.  
DANIA FL 33004

Mailing Address

% PETER BESHOURI  
1901 TIGERTAIL BLVD.  
DANIA FL 33004

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                   |                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| 3. Date incorporated or created<br><b>04/26/1988</b>                                                                                              | 3a. Date of Last Report<br><b>04/07/1994</b> |
| 4. FEI Number<br><b>65-0049546</b>                                                                                                                | Applied For<br>Not Applicable                |
| 5. Certificate of Status Desired<br><input type="checkbox"/>                                                                                      | \$8.75 Additional Fee Required               |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                | \$5.00 May Be Added to Fees                  |
| 8. This corporation is subject to corporate income tax under Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                              |

|                                  |                                   |
|----------------------------------|-----------------------------------|
| 2. Principal Place of Business   | 2a. Mailing Address               |
| 21. State Apartment<br><b>22</b> | 26. % <b>KENNETH L. DANIELSON</b> |
| 23. City & State                 | 27. City & State                  |
| 24. City                         | 28. City                          |
| 25. City                         | 29. City                          |
| 30. City                         |                                   |

## 9. Name and Address of Current Registered Agent

BESHOURI, PETER  
1901 TIGERTAIL BLVD.  
DANIA FL 33004

## 10. Name and Address of New Registered Agent

|                                                        |           |
|--------------------------------------------------------|-----------|
| 81. Name                                               |           |
| 82. Street Address (P.O. Box Number is Not Acceptable) |           |
| 83. City                                               |           |
| 84. City                                               |           |
| 85. Zip Code                                           | <b>FL</b> |

11. Pursuant to the provisions of Sections 130.01(1)(b) and 130.11(1)(b), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as set forth in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am further submitting and accept the provisions of Sections 130.01(1)(b), Florida Statutes.

SIGNATURE

Signature of Officer or Director of Corporation (Print Name)

| 12. OFFICERS AND DIRECTORS |                      | 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS |                                                                                                   |
|----------------------------|----------------------|--------------------------------------------------|---------------------------------------------------------------------------------------------------|
| TITLE                      | D                    | TITLE                                            | P. <del>CHANGE</del> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | BESHOURI, PETER      | 1. NAME                                          |                                                                                                   |
| STREET ADDRESS             | 1901 TIGERTAIL BLVD. | 1.1 STREET ADDRESS                               |                                                                                                   |
| CITY, ST, ZIP              | DANIA FL             | 1.2 CITY, ST, ZIP                                |                                                                                                   |
| TITLE                      | D                    | TITLE                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                 |
| NAME                       | STURGIS, GREGORY     | 2. NAME                                          |                                                                                                   |
| STREET ADDRESS             | 1901 TIGERTAIL BLVD. | 2.1 STREET ADDRESS                               |                                                                                                   |
| CITY, ST, ZIP              | DANIA FL             | 2.2 CITY, ST, ZIP                                |                                                                                                   |
| TITLE                      | D                    | TITLE                                            | <del>CHANGE</del> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition    |
| NAME                       | BLUMBERG, MICHAEL    | 3. NAME                                          |                                                                                                   |
| STREET ADDRESS             |                      | 3.1 STREET ADDRESS                               |                                                                                                   |
| CITY, ST, ZIP              | DANIA FL             | 3.2 CITY, ST, ZIP                                |                                                                                                   |
| TITLE                      | D                    | TITLE                                            | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                      |
| NAME                       | PICCIRILLI, JOSEPH   | 4. NAME                                          |                                                                                                   |
| STREET ADDRESS             | 1901 TIGERTAIL BLVD. | 4.1 STREET ADDRESS                               |                                                                                                   |
| CITY, ST, ZIP              | DANIA FL             | 4.2 CITY, ST, ZIP                                |                                                                                                   |
| TITLE                      | D                    | TITLE                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                 |
| NAME                       | MCEWEN, RICHARD      | 5. NAME                                          |                                                                                                   |
| STREET ADDRESS             | 1901 TIGERTAIL BLVD  | 5.1 STREET ADDRESS                               |                                                                                                   |
| CITY, ST, ZIP              | DANIA FL 33004       | 5.2 CITY, ST, ZIP                                |                                                                                                   |
| TITLE                      | D                    | TITLE                                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                      |
| NAME                       | GRIFFITH, KAY G.     | 6. NAME                                          |                                                                                                   |
| STREET ADDRESS             | 1901 TIGERTAIL BLVD  | 6.1 STREET ADDRESS                               |                                                                                                   |
| CITY, ST, ZIP              | DANIA FL             | 6.2 CITY, ST, ZIP                                |                                                                                                   |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 130.01(1)(b), Florida Statutes. I further certify that the information included 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 manager or business empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 and changed or not an attachment with a checkmark.

SIGNATURE:

*Kenneth L. Danielson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**KENNETH L. DANIELSON**

4/28/95  
Date

305-924-4385  
Telephone