2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N44019

1. Entity Name

SAHARA FUND, INC.

100 W. CYPRESS CREEK RD., STE. 900 FT. LAUDERDALE FL 33309

Principal Place of Business

2. Principal Place of Business

Mailing Address

3. Mailing Address

100 W. CYPRESS CREEK RD., STE. 900 FT. LAUDERDALE FL 33309

Suite, Apt. #, e	tc.	Suite, Apt. #, et	Suite, Apt. #, etc.				
City & State		City & State	City & State				
Zip	Country	Zip	Country				

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90105 049 ****61.25

HUDDOGZOM



NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME CHERIF, AHMED A STREET ADDRESS CITY-ST-ZIP TITLE NAME SMITH, MAUREEN L STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Suite, Apt. #, etc.				uite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
S. Certificate of Status Desired Fee Required JOSEPHER, RICHARD A ESQ. GUTTER JOSEPHER & RUFFIN 100 W. CyPRESS CREEK RD, SUITE 900 FT. LAUDERDALE FI. 33301 SIGNATURE Signature, loped or printed rame of registered agent and time 1 applicable. NOTE: Registered Agent seprence required when rentation; DATE	City & State C			ity & State			4. FEI Number	4. FEI Number 65-0271304				
JOSEPHER, RICHARD A ESQ. GUTTER JOSEPHER & RUFFIN 100 W, CYPRESS CREEK RD, SUITE 900 FT. LAUDERDALE FL 33301 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE Signature lypsed or primed name of registered agent and little if application. (NOTE: Registered Agent signature required when resistancy) DATE	Zip Country Z			Zip	p Country		try	5. Certificate of		.75 Additional		
JOSEPHER, RICHARD A ESQ. GUTTER JOSEPHER & RUFFIN 100 W, CYPRESS CREEK RD, SUITE 900 FT. LAUDERDALE FL 33301 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE Signature, types or pritted name of registered agent and life if appricable. (NOTE Registered Agent signature required when renosating) DATE		6. Name	and Address of Current	Registere	ed Agent		7. Name and Address of New Registered Agent					
GUTTER JOSEPHER & RUFFIN 100 W, CYPRESS CREEK RD., SUITE 900 FT. LAUDERDALE FL 33301 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Florida. SIGNATURE SIGNATURE FILE NOW: FEE IS \$61.25 Ariter September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Delete TITLE NAME SIRET ADDRESS CITY-ST-2IP TITLE D CHARIFF, AHMED A 4438 TINDALL ST, N.W. WASHINGTON DC TITLE D KNIGHT, JAMES TWO CHARLTON ST 39G SIRET ADDRESS CITY-ST-2IP TITLE D KNIGHT, JAMES TWO CHARLTON ST 39G SIRET ADDRESS CITY-ST-2IP TITLE D KNIGHT, JAMES TWO CHARLTON ST 39G SIRET ADDRESS CITY-ST-2IP TITLE D SIMTH, MAUREEN L SIRET ADDRESS CITY-ST-2IP TITLE D KNIGHT, JAMES TWO CHARLTON ST 39G SIRET ADDRESS CITY-ST-2IP TITLE D SIMTH, MAUREEN L SIRET ADDRESS SIRET A						ļ	Name					
SIGNATURE Signature File Now: Fee See	GUTTER JOSEPHER & RUFFIN					Street Address (P.O. Box Number is Not Acceptable)						
SIGNATURE Signature, typical or printed name of registered agent and late if applicable. (NOTE: Registered Agent algorithm reactivities under renderating) DATE	ft. Laud	erdale fl	. 33301				City		FL	Zip Cod	le	
Arter September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Added to Fees Department of State 10.1' OFFICERS AND DIRECTORS TILE NAME SIRET ADDRESS CITY-ST-ZIP TITLE D D Delete TITLE D TITLE TITL				, ,								
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	NAME STREET ADDRESS				☐ Delete	NAME STREET				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 contains an officer or directly 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an officer or directly stated in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or directly stated in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or directly stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(iii), Florida Statutes. I further certify that I am an officer or directly supplied with the same supplied with the	NAME STREET ADDRESS CITY-ST-ZIP					NAME STREET CITY-ST	T-ZIP				Addition	

of the corporation or supplemental report is true and accurate and that my signature shan have the same legal effect as it 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Maureen Smith, Director