

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N49640

(8)

1. Corporation Name

T & T SAGA BOYS INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

6321 N.W. 179TH TER.  
MIAMI FL 33015

6321 N.W. 179TH TER.  
MIAMI FL 33015

FILED

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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		06/30/1992		08/14/1995	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		65-0435585		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		8.75 Additional Fee Required	
				6. Election Campaign Financing		5.00 May Be Added to Fees	
				Trust Fund Contribution			
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GARLAND, JILL 1650 NE 135TH STREET UNIT 709 MIAMI FL 33181				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	DELETE		1.1 TITLE	Change Addition		
NAME	FORDE, NORRIS			1.2 NAME			
STREET ADDRESS	6321 N.W. 179TH TER.			1.3 STREET ADDRESS	500002202255---4		
CITY-ST-ZIP	MIAMI FL 33015			1.4 CITY-ST-ZIP	--08/08/97--01130--001		
TITLE	VD	DELETE		2.1 TITLE	Change Addition		
NAME	DILLON, FRANKLYN D.			2.2 NAME			
STREET ADDRESS	5632 SW 1ST COURT			2.3 STREET ADDRESS			
CITY-ST-ZIP	PLANTATION FL			2.4 CITY-ST-ZIP			
TITLE	SD	DELETE		3.1 TITLE	Change Addition		
NAME	GARLAND, JILL			3.2 NAME			
STREET ADDRESS	1650 N.E. 135TH ST., #209			3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33181			3.4 CITY-ST-ZIP			
TITLE	SD	DELETE		4.1 TITLE	Change Addition		
NAME	ALLONG, HUGH			4.2 NAME			
STREET ADDRESS	7756 ALHAMBRA BLVD.			4.3 STREET ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33023			4.4 CITY-ST-ZIP			
TITLE		DELETE		5.1 TITLE	Change Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		DELETE		6.1 TITLE	Change Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Norris Forde 4/21/97 (305) 375-5286  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)