

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000106527

1. Entity Name
SASA GENERAL CONSTRUCTION INC.



Principal Place of Business
28665 SW 158 COURT
HOMESTEAD, FL 33033

Mailing Address
28665 SW 158 COURT
HOMESTEAD, FL 33033

DO NOT WRITE IN THIS SPACE

**FILED
Aug 23, 2005 8:00 am
Secretary of State**

07-19-2005 90039 029 ***150.00

66026267



07122005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1151155	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
----------------------------------	---

6. Name and Address of Current Registered Agent

BUSTAMANTE, SILVESTRE
28665 SW 158 COURT
HOMESTEAD, FL 33033

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PVST
NAME BUSTAMANTE, SILVESTRE
STREET ADDRESS 28665 SW 158 COURT
CITY-ST-ZIP HOMESTEAD, FL 33033

TITLE D
NAME BUSTAMANTE, SILVESTRE
STREET ADDRESS 28665 SW 158 COURT
CITY-ST-ZIP HOMESTEAD, FL 33033

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR

8/10/05

Date

Daytime Phone #



ATTACHMENT

66026247

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 22, 2005

SASA GENERAL CONSTRUCTION INC.
28665 SW 158 COURT
HOMESTEAD, FL 33033

Subject: **SASA GENERAL CONSTRUCTION INC.**

Reference Number:

P01000106527

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE
CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O.
BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF
THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS
ANNUAL REPORTS SECTION