2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000027761

1. Entity Name

SABAO PROPERTIES, INC.



FILED Feb 12, 2003 8:00 am Secretary of State

02-12-2003 90135 043 ***150.00

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Principal Plac 9749 SW 45 L		Mailing Address 9749 SW 45 LANE						
MIAMI FL 331		MIAMI FL 33178						
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2. Principal P	lace of Business	3. Mailing Address	*				THE LIGHT	
10167	+ NW 43 TERR	10167 NW	43 TER	R	1			
Suite, Apt.		Suite, Apt. #, etc.		٠ ا	CHECK HERE IF MAKING	CHANGES		
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City & Stat		City & State	1	4. 9	FEI Number 0625785		plied For t Applicable	l
MIA		MIAMINE	<u></u>					l
15E	78 Country USA	Zip '	Country	5. (\$8.75 Add Fee Required		
222	6. Name and Address of Current	Ponistored Agent	7.57	7. 1	Name and Address of New Registered	·		
	6. Name and Address of Current	negistered Agent	Name					. 🛫
CANTOC	MADOOS T		5A	NTOS	, MARCOS T			
SANTOS, MARCOS T			Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
9749 SW			101	<u>U T Q</u>	W 42 IERK			
Miami Fl	33178 🚕							l
			City	MIAM	, i FL	Zin Code	378	
8. The above	named entity submits this statement for	or the purpose of changing its r	egistered office or	registered ag	ent, or both, in the State of Florida. I am	amiliar with,	and accept	l
the obligat	tions of registered attent.	1						i
•		\ hie			0/50	22/07	5	
SIGNATURE !	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signatur	e required when re		-		l
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00					9. Election Campaign Financing Trust Fund Contribution.		O May Be I to Fees	ļ
Make Check	k Payable to Florida Department o	f State						l
10.	OFFICERS AND	DIRECTORS	11.		DDITIONS/CHANGES TO OFFICERS AND	5-4		=
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NAME			TITLE NAME STREET ADDRESS CHY-ST-ZIP					
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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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

(786) 331-9621 07 0203