

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 31, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90147 031 \*\*\*150.00

DOCUMENT # **P02000063303**

1. Entity Name  
**SARU ENTERPRISE INC**



Principal Place of Business

~~1200 N W 171ST STREET~~  
~~MIAMI FL 33169~~

Mailing Address

~~1200 N W 171ST STREET~~  
~~MIAMI FL 33169~~

2. Principal Place of Business

**4822 NW 167th St**

3. Mailing Address

**4822 NW 167th St**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**miami FL**

City & State

**miami FL**

Zip

**33014**

Country

**USA**

Zip

**33014**

Country



CHECK HERE IF MAKING CHANGES

4. FEI Number

**02-0606584**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**WYNTER, CAROL M**

~~1280 N W 171ST STREET~~

~~MIAMI FL 33169~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

**4822 NW 167th St**

City **miami**

FL

Zip Code **33014**

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**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PS	WYNTER, CAROL M	1280 N W 171ST STREET	MIAMI FL 33169	<input checked="" type="checkbox"/>
V	WYNTER, NEVILLE B	1280 N W 171ST STREET	MIAMI FL 33169	<input checked="" type="checkbox"/>
T	FORSTER, WILLARD	1280 N W 171ST STREET	MIAMI FL 33169	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
President	Wynter, CAROL M.	4822 NW 167th St	miami, FL 33014	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	Wynter, Neville B.	4822 NW 167th St	miami, FL 33014	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Foster, Willard	4822 NW 167th St	miami, FL 33014	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secretary	Foster, Andrene	4822 NW 167th St	miami, FL 33014	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Carol M Wynter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/03 Date  
305-623-3444 Daytime Phone #

CR2E034 (10/02)