

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127548

FILED  
Apr 06, 2006  
Secretary of State

Entity Name: SARA INVEST. CORP.

## Current Principal Place of Business:

16375 NE 18 AV  
304  
SUNNY ISLES, FL 33162 US

## New Principal Place of Business:

16375 NE 18 AV  
SUITE 322  
SUNNY ISLES, FL 33162 US

## Current Mailing Address:

16375 NE 18 AV  
304  
SUNNY ISLES, FL 33162 US

## New Mailing Address:

16375 NE 18 AV  
SUITE 322  
SUNNY ISLES, FL 33162 US

FEI Number: 20-2486541

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ  
SERBER & WEALCATCH, P.A.  
2875 NE 191ST ST - STE 801  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ESSES, SALOMON  
Address: 16375 NE 18 AV - 304  
City-St-Zip: SUNNY ISLES, FL 33180 US

Title: D ( ) Delete  
Name: ESSES, RAFAEL  
Address: 16375 NE 18 AV - 304  
City-St-Zip: SUNNY ISLES, FL 33162 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ESSES, SALOMON  
Address: 16375 NE 18 AV - 322  
City-St-Zip: SUNNY ISLES, FL 33180 US

Title: D (X) Change ( ) Addition  
Name: ESSES, RAFAEL  
Address: 16375 NE 18 AV - 322  
City-St-Zip: SUNNY ISLES, FL 33162 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALOMON ESSES

D

04/06/2006

Electronic Signature of Signing Officer or Director

Date