2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158843

Entity Name: S.A.E., INC.

FILED Jan 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 777 NW 72 AVENUE 777 NW 72 AVENUE 3D19 3098 MIAMI, FL 33126 MIAMI, FL 33126 **Current Mailing Address: New Mailing Address:** 777 NW 72 AVENUE 777 NW 72 AVENUE 3D19 3098 MIAMI, FL 33126 MIAMI, FL 33126 FEI Number: 59-6071516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKINNER, DONNA R SKINNER, DONNA R 777 NW 72 AVENUE 777 NW 72 AVENUE 3098 3D19 MIAMI, FL 33126 US MIAMI, FL 33126 US 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: 01/17/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition Title: () Delete Title: CARROLL, TOM CARROLL, TOM Name: Name: 777 NW 72 AVENUE, SUITE 3D19 777 NW 72 AVENUE, SUITE 3098 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126 VΡ Title: VD Title: () Delete (X) Change () Addition GIESE, PAULETTE Name: GIESE, PAULETTE Name: 777 NW 72 AVENUE, SUITE 3D19 777 NW 72 AVENUE, SUITE 3098 Address: Address: MIAMI, FL 33126 MIAMI, FL 33126 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: VP. () Delete TD SONIN, LARRY ARREDONDO, ED Name: Name: 777 NW 72 AVENUE, SUITE 3D19 777 NW 72 AVENUE, SUITE 3098 Address Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126 Title: () Delete Title: CD () Change (X) Addition SHNIDER, BARRY Name: Name: Address: Address: 777 NW 72 AVENUE, SUITE 3098 City-St-Zip: City-St-Zip: MIAMI, FL 33126

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: TOM CARROLL PD 01/17/2006