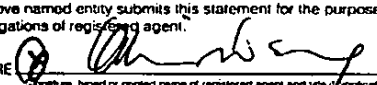
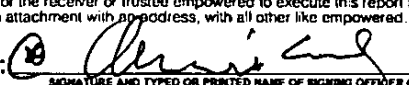


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-06-2006 90023 028 ***150.00

DOCUMENT # P05000000545 1. Entity Name SAYA INTERNATIONAL, INC.																																	
Principal Place of Business 211 NE 8 AVE #303 HALLANDALE, FL 33009			Mailing Address 18999 BISCAYNE BLVD STE 205 AVENTURA, FL 33180																														
2. Principal Place of Business 201 GOLDEN ISLES DR. Suite, Apt. #, etc. # 307			3. Mailing Address Suite, Apt. #, etc.																														
City & State HALLANDALE BEACH, FL			City & State																														
Zip 33009		Country USA		4. FEI Number 20-2097157																													
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable																													
6. Name and Address of Current Registered Agent WONG, LAI SEE 211 NE 8 AVE #303 HALLANDALE, FL 33009				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 201 GOLDEN ISLES DR. #307 City HALLANDALE BEACH FL Zip Code 33009																													
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  DATE 4/12/06 (NOTE: Registered Agent signature required when re-registering)																																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																														
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">P</td> <td style="width: 80%;">WONG, LAI SEE</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td>211 NE 8 AVE, 33003</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>HALLANDALE, FL 33009</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> <td></td> </tr> </table>			TITLE	P	WONG, LAI SEE	☐ Delete	NAME		211 NE 8 AVE, 33003		STREET ADDRESS		HALLANDALE, FL 33009		CITY - ST - ZIP				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">Change</td> <td style="width: 80%;">Addition</td> </tr> <tr> <td>NAME</td> <td>☒</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>201 GOLDEN ISLES DR. #307</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td>HALLANDALE BEACH, FL 33009</td> </tr> </table>			TITLE	Change	Addition	NAME	☒		STREET ADDRESS		201 GOLDEN ISLES DR. #307	CITY - ST - ZIP		HALLANDALE BEACH, FL 33009
TITLE	P	WONG, LAI SEE	☐ Delete																														
NAME		211 NE 8 AVE, 33003																															
STREET ADDRESS		HALLANDALE, FL 33009																															
CITY - ST - ZIP																																	
TITLE	Change	Addition																															
NAME	☒																																
STREET ADDRESS		201 GOLDEN ISLES DR. #307																															
CITY - ST - ZIP		HALLANDALE BEACH, FL 33009																															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table>			TITLE	☐ Delete	NAME		STREET ADDRESS		CITY - ST - ZIP		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%; text-align: center;">☐ Change</td> <td style="width: 80%; text-align: center;">☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	☐ Change	☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP										
TITLE	☐ Delete																																
NAME																																	
STREET ADDRESS																																	
CITY - ST - ZIP																																	
TITLE	☐ Change	☐ Addition																															
NAME																																	
STREET ADDRESS																																	
CITY - ST - ZIP																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table>			TITLE	☐ Delete	NAME		STREET ADDRESS		CITY - ST - ZIP		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%; text-align: center;">☐ Change</td> <td style="width: 80%; text-align: center;">☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	☐ Change	☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP										
TITLE	☐ Delete																																
NAME																																	
STREET ADDRESS																																	
CITY - ST - ZIP																																	
TITLE	☐ Change	☐ Addition																															
NAME																																	
STREET ADDRESS																																	
CITY - ST - ZIP																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table>			TITLE	☐ Delete	NAME		STREET ADDRESS		CITY - ST - ZIP		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%; text-align: center;">☐ Change</td> <td style="width: 80%; text-align: center;">☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	☐ Change	☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP										
TITLE	☐ Delete																																
NAME																																	
STREET ADDRESS																																	
CITY - ST - ZIP																																	
TITLE	☐ Change	☐ Addition																															
NAME																																	
STREET ADDRESS																																	
CITY - ST - ZIP																																	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 address, with all other like empowered.																																	
SIGNATURE:  DATE 4/12/06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																	

66010699



01182006 Chg-P CR2E034 (11/05)