

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000141175

FILED  
Oct 06, 2006  
Secretary of State

Entity Name: SAR INVESTMENT ASSOCIATES, INC.

**Current Principal Place of Business:**

8820 N.W. 194TH TERRACE  
MIAMI, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

8820 N.W. 194TH TERRACE  
MIAMI, FL 33018

**New Mailing Address:**

FEI Number: 20-3660501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRETOS, ALEXANDER L  
8820 N.W. 194TH TERRACE  
MIAMI, FL 33018 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: SHELIA M.SALVADOR

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BRETOS, ALEXANDER L  
Address: 8820 N.W. 194TH TERRACE  
City-St-Zip: MIAMI, FL 33018

Title: DVT ( ) Delete  
Name: COLLAZO, RALPH C  
Address: 16201 ABERDEEN WAY  
City-St-Zip: MIAMI LAKES, FL 33014

Title: DS ( ) Delete  
Name: SALADOR, SHELIA  
Address: 1071 WEST 55TH PLACE  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SHELIA M. SALVADOR

Electronic Signature of Signing Officer or Director

D/S

10/06/2006

Date