FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P31024** **(3)**

1. Corporation Name

SARATEC, INC.

Principal Place of Business	Mailing Address
~~10335 LANDSBURY DR. #S300~~ ~~HOUSTON TX 77099-3407~~	~~10335 LANDSBURY DR. #S300~~ ~~HOUSTON TX 77099-3407~~

3. Date Incorporated or Qualified: 09/20/1990
3a. Date of Last Report: 05/01/1995

4. FEI Number: 22-2881268 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 18167 US 19 North	26 18167 US 19 North
22 Suite, Apt. #, etc. 280	27 Suite, Apt. #, etc. 280
23 City & State Clearwater, FL	28 City & State Clearwater, FL
24 Zip FL 34624 25 Country Pinellas	29 Zip 34624 30 Country Pinellas

9. Name and Address of Current Registered Agent

~~CHRIS LEWIS~~
~~10335 LANDSBURY DR.~~
~~S300~~
~~HOUSTON TX 77099~~

10. Name and Address of New Registered Agent

81 Name: John R. Shute
82 Street Address (P.O. Box Number is Not Acceptable): 18167 US 19 North
83 Suite 280
84 City: Clearwater FL 85 Zip Code: 34624

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] DATE: 4/30/96

Signature of the New Registered Agent, if changing

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	MAUD, KEN		1.2 NAME		
STREET ADDRESS	1500 N. WASHINGTON BLVD.		1.3 STREET ADDRESS	18167 US 19 North, Ste 280	
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	Clearwater, FL 34624	
TITLE	ST	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LEWIS, CHRIS		2.2 NAME		
STREET ADDRESS	1500 N. WASHINGTON BLVD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, KENNETH		3.2 NAME		
STREET ADDRESS	10335 LANDSBURY		3.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	Secretary	☐ Change ☒ Addition
NAME			4.2 NAME	John R. Shute	
STREET ADDRESS			4.3 STREET ADDRESS	18167 US 19 N. Ste 280	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Clearwater, FL 34624	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or added, above with an address.

SIGNATURE: [signature] 4/30/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #