

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90080 017 ***150.00

DOCUMENT # P93000008794

1. Entity Name
S A G INTERNATIONAL, INC.

Principal Place of Business

**8861 NW 102ND ST
 MEDLEY FL 33178
 US**

Mailing Address

**PO BOX 171385
 HIALEAH FL 33017
 US**

2. Principal Place of Business

6220 SW 82 AVE

3. Mailing Address

6220 SW 82 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI FL

City & State
MIAMI FL

4. FEI Number **65-0402176**

Applied For
 Not Applicable

Zip
33143

Country
USA

Zip
33143

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CABRERA, ABAD
 9304 NW 102 ST.
 MEDLEY FL 33138**

Name

Street Address (P.O. Box Number is Not Acceptable)

6220 SW 82 AVE

City
MIAMI FL

FL

Zip Code
33143

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CABRERA, ABAD 8861 NW 102ND ST MEDLEY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CABRERA, ARACELIS 8861 NW 102ND ST MEDLEY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	6220 SW 82 AVE MIAMI FL 33143	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6220 SW 82 AVE MIAMI, FL 33143	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Aracelis Cabrera* **ARACELIS CABRERA, V.P.**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/02 305-285-0645
 Date Daytime Phone #

CR2E034 (9/01)