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Mar 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P93000052112 (8)

1. Corporation Name
SATHER ENTERPRISES, INC.



Principal Place of Business Mailing Address
101 SHEFFIELD CIRCLE W PALM HARBOR FL 34683 US
101 SHEFFIELD CIRCLE W PALM HARBOR FL 34683-5742 US

3. Date Incorporated or Qualified 07/19/1993
3a. Date of Last Report 06/11/1996

2. Principal Place of Business 2a. Mailing Address
21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.
22. City & State 27. City & State
23. Zip Country 28. Zip Country
24. 25. 29. 30.

4. FEI Number 59-3229724 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
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
SATHER, KATHERINE A
101 SHEFFIELD CIRCLE W
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City FL 85. Zip Code

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 Katherine A. Sather DATE March 24, 1997

12. OFFICERS AND DIRECTORS
1.1 TITLE DVPS
1.2 NAME SATHER, KATHERINE A
1.3 STREET ADDRESS 101 SHEFFIELD CIRCLE W
1.4 CITY-ST-ZIP PALM HARBOR FL
2.1 TITLE DPT
2.2 NAME SATHER, BEN J
2.3 STREET ADDRESS 101 SHEFFIELD CIRCLE W
2.4 CITY-ST-ZIP PALM HARBOR FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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 on an attachment with an address.

SIGNATURE: Katherine A. Sather DATE: March 24/97 DAYTIME PHONE: 813-786-8675

CR2E034 (9/96)