## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000069216 (8)

SOPHISTICATED SAW INDUSTRIES, INC.

## **FILED** May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
211 NW 4TH AVE HALLANDDALE FL 33000		211 NW 4TH AVE HALLANDDALE FL 3300	211 NW 4TH AVE Hallanddale fl 33009			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
					*.	09/30/1993	
2. Principal F	Place of Business	2a, Mailing Address		-		4. FEI Number	Applied For
et l		<del></del>	26			65-0443899	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.				- \$8	75 Additional
20		— <u> </u>	27			I E Contitionate of Status Desired I I Told	ee Required
City & State		City & State	<u> </u>			6. Election Campaign Financing \$5	5.00 May Be
13		28	28				dded to Fees
Zip	Country	Zip	Col	untry		8. This corporation owes or has paid the current ye	ar Intangible
4	25	29	30			Personal Property Tax due June 30.  Yes	□ No
	<ol><li>Name and Address of Cur</li></ol>	rent Registered Agent				10. Name and Address of New Registered Agent	
IS/	RAEL, HERBERT			81	Name		
	291 NE 30TH AVE			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
	ÆNTURA FL 33180			Silver Addi		to be removed to the recognition	
				83			
				84	City	Tag (	Zip Code
				**	City	FL  85	Zip Code
11. Pursuant office or agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob-	5502 and 607.1508, Florida Statu ate of Florida. Such change was oligations of, Section 607.0505, Fl	tes, the a authorize lorida Sta	above ed by atutes	named corpo the corporatio	oration submits this statement for the purpose of chang on's board of directors. I hereby accept the appointme	ging its registered int as registered
SIGNATURE	Signature typed or printed name of registered	Lagory and little # granicable (BIO)	TL Degiclose	ad Anar	d rigorbuse requires	ed when reinstating) DATE	
12.	AND DIRECTORS	13.		i Bignature requiet	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12	
TITLE	l D	☐ DELETE	1.1 F	ITLE		Ch	
NAME	ISRAEL, HERBERT			LAME		_	• –
STREET ADDRESS	20291 NE 30TH AVE				NDDRESS		
CITY-ST-ZIP	AVENTURA FL 33180			UTY-ST			
TITLE			2.1 7		Ln .	□ Ch	ange Addition
NAME		_	2.2 N	IAME			•
STREET ADDRESS					NDDRESS		
CITY-ST-ZIP	1			CITY-S			
TITLE		DELETE	3.1 T			☐ Ch	ange Addition
NAME			3.2 N		Į		
STREET ADDRESS					ADDRESS		
CITY - ST - ZIP	1			CITY-S			
TITLE	<u> </u>	DELETE	4.1 7		<del>"</del>	☐ Ch	ange
NAME			4.21	NAME			
STREET ADDRESS					UDRESS		
CITY-ST-ZIP				HTY-ST	I		
TITLE		☐ DELETE	5.1 T		F-1	Ch	ange
NAME			5.2 N		ĺ	<del></del>	- —
STREET ADDRESS	1				address		
CITY-ST-ZIP	1						
TITLE			540	HTV_CT	- 7IP		l
		☐ DELETE		ITY-ST	-ZiP	Ch	ange Addition
		DELETE	6.1 T	ITLE	-ZIP	Ch	ange Addition
NAME STREET ADDRESS		DELETE	6.1 T 6.2 N	itle IAME	- ZIP NDDRESS	Ch	ange Addition

14. 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 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.