

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 26 PM 4:01

DOCUMENT # P94000006405 (2)

1. Corporation Name

SACQUARA SERVICES, INC.

Principal Place of Business

4545 PLEASANT HILL RD
SUITE 110
KISSIMMEE FL 34759

Mailing Address

4545 PLEASANT HILL RD
SUITE 110
KISSIMMEE FL 34759

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/18/1994

3a. Date of Last Report

2. Principal Place of Business

21 2901 ELBERT WAY

Suite, Apt. #, etc.

2a. Mailing Address

26 2901 ELBERT WAY

Suite, Apt. #, etc.

4. FEI Number

59-3218704

Applied For

Not Applicable

22 City & State

23 KISSIMMEE, FLORIDA

27 City & State

28 KISSIMMEE, FLORIDA

24 FL 34758

25 U.S.A.

29 34758

30 U.S.A.

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

9. Name and Address of Current Registered Agent

LANGHAM, STEPHEN
4545 PLEASANT HILL RD
SUITE 110
KISSIMMEE FL 34759

10. Name and Address of New Registered Agent

81 Name

MARK PEDLEY

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

2901 ELBERT WAY

83

84 City

KISSIMMEE

FL

85 Zip Code

34758

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 MARK PEDLEY, PRESIDENT.

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

(NOTE: Registered Agent signature required when reappointing)

01-14-95

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
PEDLEY, MARK
634 MCKINLEY CT
KISSIMMEE FL 34759

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
PRESIDENT
MARK PEDLEY
2901 ELBERT WAY
KISSIMMEE, FL 34758
☒ Change ☐ Addition
(ADDRESS ONLY)

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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 110.07(3)(k), 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: MARK PEDLEY

01-23-95

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