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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000009140 (2) DOCUMENT #

SOUTH ATLANTIC GAS, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 885 BRQADWAY 865 BRQADWAY				1 (4 8)(8 8) (48 48 4) 4 8 6 (4 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8 6)(1 8		
RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404						
/	, ``	/ `		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	S SPACE	
				02/04/1994		
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 1200 Suite, Apt	BROADWAY	26 1200 73136 Suite, Apt. #, etc.	UADWAY	65-0468479	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	ERA 13EACH, FL	City & State RIVIERA	BEACH ,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 73.3	Country 404 25 PB	29 3 3 4 04 3	Country	8. This corporation owes or has paid the c		
24 330	25 PID 9. Name and Address of Current	Registered Apent	o Palm 13ea	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No	
DAOUE ANAM					<u> </u>	
	87 WILLOW POND RD., #A			MUHAMMAD 5. HA: ddress (P.O. Box Number is Not Acceptable)	>H N	
WEST PALM BCH FL 33417			02 311661 A	52 Silved Address (F.O. Box Number is Not Acceptable)		
			83 47	383 WILLOW pond a	RCIE	
				est palm neach Fl		
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 bereby accept the appointment as registered						
agent. I am familiar with and acceptate objection 607.0505, Florida Statutes.						
SIGNATURE CONTROL And Control of registered agent aurit fit of applicable (NOTE Registered agent signature required when reinstating) WATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	VSD	☐ DELET E	1.1 TITLE	PSD I.	Change Addition	
NAME	HASAN, MUHAMMAD S -8383 WILLOWPOND RD, #A		1.2 NAME	MUHAMMAD S.HASAN	.	
STREET ADORESS	WEST PALM BCH FL 33417		1.3 STREET ADDRESS	4383 Willow pond circle west palm Beach	E 321110	
CITY-ST-ZIP	PID	DELETE	1.4 City - St - ZiP 2.1 Title	NOT rain seam	Change Addition	
NAME	HAQUE, ANAM	[Dretter	2.2 NAME		Change D Modition	
STREET ADDRESS	4387 WILLOWPOND RD, #A		2.3 STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BCH FL 33417		2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		1	
CITY+ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	51 THILE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		речете	5.4 CiTY-ST-ZIP		Chamas Tagasts	
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME CTOSET ADORSES			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for t	6.4 CITY - ST - ZIP	in Section 119 07(3)(i) Florida Statutes I further of	sertify 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.

MUHAMMAD S. HASAN

President