SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000014517 (4)

THE SAYLOR GROUP, INC.

FILED Sep 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Addres					\$S					BURNER BURNER	 	
20941 BOCA RIDGE DRIVE S. BOCA RATON FL 33428				20941 BOCA RIDGE DRIVE S. BOCA RATON FL 33428					DO NOT WEIT	- 151 2 7 110	S DAOF	
									DO NOT WRITE IN THIS SPACE			
1									3. Date Incorporated or Qualified 02/22/1994		}	
2 Principal D	lace of Busine	1 20	2a. Mailing Address					UC/CC/ 1994 4. FEI Number		Applied For		
2. Principal Place of Business				26 26							Applied For	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					65-0469765		Not Applicable \$8.75 Additional	
22				27					5. Certificate of Status Desired		Fee Required	
City & State	е		City & State					6. Election Campaign Financing	r	\$5.00 May Be		
23				28					Trust Fund Contribution	<u> </u>	Added to Fees	
Zip	Country			ZipCour			У		8. This corporation owes or has paid the current year Intangible			
24				29 30					Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent CAVIOD MARKEC 81									10. Name and Address of New Re	gistered A	Agent	
SAYLOR, JAMES							^	lame				
	I1 B o ca Rie A Raton F					s	treet Addres	ss (P.O. Box Number is Not Acceptable)				
BOC				83	+-							
						84	ı c	City			85 Zip Code	
				/ 						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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.												
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signal										DATE		
12.		OFFICERS	AND DIRE			13.			ADDITIONS/CHANGES TO OFFI	CERS AN	D DIRECTORS IN 12	
TITLE	D	14450		البا	DELETE	1.1 TITLE				l	Change Addition	
NAME					1.2 NA							
STREET ADDRESS 20941 BOCA RIDGE DRIVE S. CITY-ST-ZIP BOCA RATON FL 33428				1.3 STF			T ADD	ORESS				
CITY-ST-ZIP	BUCA KAI	UN FL 33428					CITY-ST-ZIP			,		
TITLE				الــا	DELETE	2.1 TITLE		ł		ι	Change Addition	
NAME				2.2 NA								
STREET ADDRESS								RESS				
CITY-ST-ZIP		2.4 C/1			T-ZIP			——— —				
TITLE				الـا	DELETE	3.1 TITLE				L	Change Addition	
NAME						3.2 NAME						
STREET ADDRESS						3.3 STREE						
CITY-ST-ZIP						3.4 CITY-S 4.1 TITLE	ı-ZiP			— -	–	
NAME				الــا	DELETE	4.1 TITLE 4.2 NAME				L	Change Addition	
[ı					•	T AOC	abene				
STREET ADDRESS						4.3 STREE 4.4 CITY-S		mc55				
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NAME				יו	DELETE	5.2 NAME				L	Change Addition	
STREET ADDRESS						53 STREE	TADO	NDECC				
li								1				
CITY-ST-ZIP TITLE					DELETE	5.4 CITY-S 6.1 TITLE	I-ZIP				Chance Addr.	
NAME				L_](DELETE	6.2 NAME				L.	Change Addition	
STREET ADORESS							r ann	Dree				
							STREET ADORESS					
CITY-ST-ZIP						6.4 CITY-S	1-211					

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 trusted 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.

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