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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400078932 (8)

SATURN ENTERPRISES, INC.

SATURIN ENTERPRISES, IN	. .	
Principal Place of Business	Mailing Address	
725 NORTH A1A. UNIT A-106 JUPITER FL 33477	725 NORTH A1A, UNIT A-106 JUPITER FL 33477	
Addan Chlan	_	

JUPITER FL 33477	JUPITER FL 33477				
2. Principal Place of Business			3. Date Incorporated or Qualified 10/28/1994	3a. Date of Last Report 02/21/1995	
1 1508 Cypaess	OR 26 SA TURO Exote	ENLISED FA	4. FEI Number 62-1583164	Applied For Not Applicable	
Suite, April 10, etc. 2 Jupiter Fl	Suite, Apt. #, etc. 27 /508 Cype.	58 PR.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Style 3 469	City & State 28 Juntes	Fl-	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
4 25 /1/m	Beach 29 33469 30 A	Hon Beach	8. This corporation has liability for in Florida Statutes Yes	No	
9. Name and Address of Current Registered Agent		81 Name	10. Name and Address of New Registered Agent		
FISHER, GERALD E 725 NORTH A1A, UNIT A-106 JUPITER FL 33477			S (P.O. Box Number is Not Acceptable	ell E.	
		83 /5	D& Cypress 1	NR.	
		84 City	wortes	FL 85 Zip Gode	
 Pursuant to the provisions of Sections 60 or registered agent, or both, in the State familiar with, and accept the obligations of 	07.0502 and 607.1508, Florida Statutes, the all of Florida. Such change was authorized by the of, Soction 607.0505, Florida Statutes.	pove-named corporation corporation board	on submits this statement for the purp of directors. I hereby accept the appo	cose of changing its registered office intreent as registered agent. I am	

CR2E034 (12/95)

SIGNATURE (NOTE Registered Agent signature required when 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 HLE DELETE 1. 1 TITLE ☐ Change ☐ Addition FISHER, GERALD NAMI 1.2 NAME 19923 WILKINSON LEAS ROAD STREET ACCURESS 13 STREET ADDRESS TEQUESTA FL 1 4 CITY - ST - ZIP DELETE T:TLE 2 1 TITLE ☐ Change ■ Addition N4Ms KWEK, DONALD 2.2 NAME STREET ADDRESS 2356 SE CASSEL LANE 23 STREET ADDRESS STUART FL CHY S1-ZR 24 CITY-ST-ZIP THLE DELETE 3 1 TITLE ☐ Change ☐ Addition KWEK, CAROL 3.2 NAME 3356 SE CASSEL LANE STEEL LADDRESS 33 STREET ADDRESS STUART FL CHTY: \$1 ZIP 3 4 CHY - <u>ST - ZiP</u> Till: F DELETE 4 1 TITLE ☐ Change ☐ Addition FISHER, DIANNE NAMI 4.2 NAME 19923 WILKINSON LEAS ROAD STREE! ADDRESS 4.3 STREET ADDRESS **TEQUESTA FL** CITY:ST 70 4 4 CITY - ST - ZIP TITLE DELETE 5. 1 TITLE ☐ Change Addition NASE 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-51-70 5 4 CITY - S1 - ZIP TITEF DELETE 6. 1 TITLE ☐ Addition NAME STREET ADDRESS 6.3 STREET ADDRESS CITY ST ZIF 64 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 119.07(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, open a attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR