

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

ARTICLE 6, CHAPTER 607
FLORIDA STATUTES

1995



FLORIDA DEPARTMENT OF STATE
TREASURY DIVISION
CORPORATION DIVISION
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000078968 (2)**

SAAR DEVELOPMENT CORPORATION

21400 NW 3RD STREET
PEMBROKE PINES FL 33029

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PEMBROKE PINES FL 33029

3. Date of Incorporation: **10/27/1994**

4. FID Number: **65-0530357**

5. Certificate of Status: **Not Applicable**

6. Election Campaign Financing: **\$8.75 Additional Fee Required**

7. Trust Fund Contributions: **\$5.00 May Be Added to Fees**

8. This corporation has liability for corporate tax under 5-199 (032) Florida Statutes: ☐ Yes ☒ No

2. Name of Corporation: **SAAR DEVELOPMENT CORPORATION**

26. Mailing Address: **21400 NW 3RD STREET
PEMBROKE PINES FL 33029**

27. State, Apt. # etc: **FL**

28. City & State: **PEMBROKE PINES FL**

29. Zip: **33029**

9. Name and Address of Current Registered Agent

**MARLOWE, RONALD J ESQ
2601 S BAYSHORE DR
19TH FLOOR
MIAMI FL 33133**

10. Name and Address of New Registered Agent

81. Name: **MARLOWE, RONALD J ESQ**

82. Street Address (P.O. Box Number or Not Applicable): **2601 S BAYSHORE DR**

83. City: **MIAMI**

84. State: **FL**

85. Zip Code: **33133**

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation has duly complied with the provisions of the Florida Statutes, Chapter 607, and that the corporation is duly organized and in good standing under the laws of the State of Florida. I hereby accept the appointment as registered agent of the corporation.

Signature of Agent

12. OFFICERS AND DIRECTORS

NAME: **DP**

NAME: **SAAR, CLYDE K**

ADDRESS: **21400 NW 3RD ST
PEMBROKE PINES FL 33029**

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

NAME: **SAAR, CLYDE K**

ADDRESS: **21400 NW 3RD ST
PEMBROKE PINES FL 33029**

14. I, the undersigned, 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)(b), 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. I am not a resident of the State of Florida and I am not a resident of the State of Florida. I am not a resident of the State of Florida. I am not a resident of the State of Florida.

SIGNATURE: **Keith Saar** **KEITH SAAR**

5-7-95 (305) 437-7258