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

DOCUMENT #

P95000092404 (9)

SAS ENERGY INC.

Principal Place of Business	Mailing Address			
14571 S.W. 17TH COURT	14571 S.W. 17TH COURT			
DAVIE FL 33325	DAVIE FL 33325			

FILED Apr 08 1998 8:00am Secretary of State



						HE 1900 BIBN 681A 6161 1081
Principal Place	e of Business	Mailing Address				
14571 S.W. 17TH COURT 14571 S.W. 17TH COURT DAVIE FL 33325 DAVIE FL 33325		Ť				
					DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified 12/05/1995	
2. Principal Pr	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 21	ado di Sadillodo	26. Walling Address			65-0626168	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.		* * * * * * * * * * * * * * * * * * * *		\$8.75 Additional
22	", 010 .	27			5. Certificate of Status Desired	Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
23		26			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the ci	rrept year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	l Agent
SCI	HROEDER, ALLEN A		4	Name		
145	571 S.W. 17TH COURT		-	32 Street Add	dress (P.O. Box Number is Not Acceptable)	
DA	VIE FL 33325			33		
			Ľ			
				34 City	FI	85 Zip Code
11. Pursuant i office or re agent 1 a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such charige was alions of, Section 607.0505, F	ites, the abo authorized lorida Statu	ove-named cor by the corpora tes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE	Signature, typed or printed name of rugistured age	nt and title if applicable (NO	TE Registered	Agent signature requ	ured when reinstating) DATE	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	DELETE	1,1 TITL	E		Change Addition
NAME	SCHROEDER, ALLEN A		1.2 NAA	AE		
STREET ADDRESS	14571 S.W. 17TH COURT		1.3 STR	EET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33325		1.4 CID	(-ST-ZIP		
TITLE	D	DELETE	2.1 TITL			Change Addition
NAME	SCHROEDER, SUE		2.2 NAM	ne l		
STREET ADDRESS	14571 S.W. 17TH COURT		2.3 STB	EET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33325			Y-ST-ZIP		
TITLE		DELETE	3.1 TOTA			Change Addition
NAME			3.2 NAN	·		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	4,1 TITL			Change Addition
NAME		hear	4. 2 NA			
STREET ADDRESS			1	EET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CIT) 5.1 T(TL	r-ST-ZIP		Change Addition
NAME			5.2 NAM	1		5/10/10/1
				1		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE	_	/-ST-ZIP	.	Change Addition
TITLE			6.1 TITL	- 1		TO CHANGE TO ADDITION
NAME			6.2 NAA	1		
STREET ADDRESS			1	EET ADDRESS		
CITY-ST-ZIP			6.4 CITY	r-ST-ZIP		

14. Thereby 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 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 of on an intrachment with an address.

SIGNATURE:

954-2363759