Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90305 049 ***158.75

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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600017143

1. Corporatio	n Name	0171.0			ļ			
SAH GROUP, INC.								
J all	VU. / 1110·						II iro di bi r it	D(480
					!			
Principal Place of Business Mailing Address						. E THE THE THE PARTY SHOULD BE SEEN THE THE	#1 4 880 1 11 8 #1	01900 Htt 1001
5660 COLLINS AVE 8281 SW 146TH ST								
APT 10D MIAMI BEACH FL 33158								
MIAMI BCH FL 33140 US				DO NOT WRITE IN THIS SPACE				
บร						3. Date Incorporated or Qualifed		
Ì						02/22/1996		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		oplied For
21	26				65-0649117		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	• -	Additional
22								equired ====================================
City & Stat	& State City & State					6. Election Campaign Financing		May Be
23	28					Trust Fund Contribution Added to Fees		
Zip	Country	CountryZipC			or this corporation error the authority and the second			
24	25	25 29 30			Personal Property Tax. ☐ Yes ☐ No			□No
Name and Address of Current Registered Agent						10. Name and Address of New Registered Ag	gent	
			1	81 N	Name			
STEIN, ALAN				82 Street Address (P.O. Box Number is Not Acceptable)				
8281 SW 146TH ST				Office Address (1.0. Dox Hamber of Not Hospitalia)				
MIAMI FL 33158				83				
			L.			,	er Zin	Code
			'	84 C	City	FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.0502	2 and 607.1508. Florida Statute	s, the abo	ove-na	amed corpor	ration submits this statement for the purpose of ch	nanging its	registered
office or i	onistered agent or both, in the State (of Florida. Such change was at	ithorized l	by the	o corporation	's board of directors. I hereby accept the appoint	ment as re	egistered
agent. I a	im familiar with, and accept the obligat	tions of, Section 607.0505, Fibi	jua Statut	165.				
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable (NOTE:	Registered A	laent sia	gnature required v	when reinstating) DATE		—— i
12.	OFFICERS AN		13.	<i>3</i> · · · · ·		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DRS IN 12
·TITLE	D DELETE			1.1 TITLE			Change	☐ Addition
NAME	STEIN, HANA	HANA 121		Æ				
STREET ADORESS	The Continue time town it can			1.3 STREET ADDRESS				
	1 AMERICAN DESIGNATION AND ASSESSMENT			1.4 CITY-ST-ZIP				
CITY-ST-ZIP	D DELETE		_	2.1 TITLE			Change	Addition
			2.1 111L					_
NAME	8281 S.W. 146TH ST.			2.3 STREET ADDRESS				
STREET ADDRESS	MIAMI FL 33158			2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP			. ,,	[
CITY-ST-ZIP	D DELETE			3.1 TITLE			Change	Addition
TITLE				3.1 IIILE 3.2 NAME				
NAME	STEIN, STEVEN			I				
STREET ADDRESS			1	3.3 STREET ADDRESS				
CITY-ST-ZIP	TIBURON CA 94920		_	3.4. C/TY-ST-Z/P			☐ Change	Addition
TITLE	□ DELETE			4.1 TITLE				
NAME	ļ		4. 2 NAI			•		
STREET ADDRESS				4.3 STREET ADDRESS				
CITY-ST-ZIP				4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITL				Change	Addition)
NAME	1		5.2 NAM	νE		•		

CITY-ST-ZIP 14. 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 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 properties an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

1.0

3.1.1 展选 登

STREET ADDRESS

CITY-ST-ZIP

NAME

☐ DELETE

☐ Change

Addition